

**ST. GREGORY CATHOLIC CHURCH  
BAPTISM REGISTRATION INFORMATION SHEET**

Date of Appointment: \_\_\_\_\_ Taken by: \_\_\_\_\_

Name of the person to be Baptized: \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Family Registered in Parish: YES \_\_\_ NO \_\_\_ If Yes, Envelope Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's First and Maiden Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work Father: \_\_\_\_\_ Work Mother: \_\_\_\_\_

Cell Father: \_\_\_\_\_ Cell Mother: \_\_\_\_\_

Email: \_\_\_\_\_

Name and Address of Church where Parents were Married: \_\_\_\_\_

If Married Outside the Church: Convalidation Possible: \_\_\_ Annulment Needed: Yes \_\_\_ No \_\_\_

Pastoral Action taken: \_\_\_\_\_

Godfather's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Address: \_\_\_\_\_ Parish: \_\_\_\_\_

Name of Proxy: \_\_\_\_\_ Parish: \_\_\_\_\_

Godmother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Address: \_\_\_\_\_ Parish: \_\_\_\_\_

Name of Proxy: \_\_\_\_\_ Parish: \_\_\_\_\_

Was Child Privately Baptized: \_\_\_\_\_ Adopted: \_\_\_\_\_

Date to attend Baptism Preparation Class: \_\_\_\_\_ Proposed Date of Baptism: \_\_\_\_\_

Actual Date Class attended: \_\_\_\_\_ Actual Date of Baptism: \_\_\_\_\_

Sponsor Certificate Received: Godfather: \_\_\_\_\_ Godmother: \_\_\_\_\_

Signature of Priest / Minister of Baptism: \_\_\_\_\_

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To be completed by secretary and filed with copy sent to Pastor:

Baptism entered in baptismal Register: Date \_\_\_\_\_ Page No. \_\_\_\_\_

Baptism Information Entered on Census Card: Date: \_\_\_\_\_