## **Baptismal Information**

Office Use:	Preparation Completed:	
Married? Spouse's name	1 0	Y / N
	eeping with the role to be taken as Godparent	Y / N Y / N
Christian Witness:  Is baptized in Trinitarian formula		v / N
OR ON THE PROPERTY OF THE PROP		
Married? Spouse's name		Y / N
If attending Mass regularly, pleas	e indicate where ith the role to be taken as Godparent	Y / N
Attends Mass and receives the E	C	Y / N
Catholic who has been confirmed	d and received Holy Eucharist	Y / N
Female Catholic Godparent:		
Married? Spouse's name		Y / N
	ith the role to be taken as Godparent	
If attending Mass regularly, pleas	e indicate where	
Attends Mass and receives the E	•	Y / N
Male Catholic Godparent:Catholic who has been confirmed		Y / N
Only one Godparent i	's required – MUST be 16 years old and confin	
Before choosing your Godparents, please refer to "Guidelines for Godparents" document.		
Godparent Information		
orginature		
Signature	•	
Do you give permission to be contact	ed by email? Yes No	
Phone Number:	Email:	
Home Address:	Postal Code	<b>:</b>
Father's Religion:	Mother's Religion:	
Father's First and Last Name:  Mother's First and Last Name:		
Child's First Name: Child's Second Name:		
Child's First Name	Child's Second Name	
Child's Surname:		