

BAPTISMAL INFORMATION FORM

(Please print)

Candidate's Full Name: _____

Sex: _____ Date of Birth: _____ Called Name: _____

Place of Birth (City and State): _____

Residence Address: (Street) _____

(City, State, ZIP) _____

Telephone Number: (Day) _____ (Evening) _____

E-mail Address(es): _____

Father's Full Name: _____

Mother's Full Name: (Including Maiden) _____

Sponsor's Full Name: _____

Sponsor's Full Name: _____

Sponsor's Full Name: _____

Sponsor's Full Name: _____

Date of Baptism: _____

Place of Baptism: _____

Officiating Priest: _____