

Baptismal Registration

Name of Child: _____
(First) (Middle) (Last)

Date of Birth: _____

City and State of Birth: _____

Father's Name: _____
(First) (Middle) (Last)

Mother's Name: _____
(First) (Middle) (Maiden Name)

Current Mailing Address: _____

Telephone Number: _____

Are you a registered member of St. Bridget? YES or NO

Godfather's Name: _____
Catholic: _____ Christian Witness: _____

Godmother's Name: _____
Catholic: _____ Christian Witness: _____

(Canon Law states: To be admitted to the role of Godparent, a person must be a Baptized Catholic who has been Confirmed and has already received their First Communion. They also must live a life in harmony with the Catholic Faith and the role to be undertaken as Godparent. A Baptized person who is non-Catholic may not be a Godparent. Rather, they may listed as a *Christian Witness*.)

Date/time of Baptism: _____
(please check with Fr. Dustin 765-825-8578 in order to confirm the date)

Meeting with Pastor: _____
(Date) (Time)

If this is your first child to be Baptized, a meeting with the pastor must take place before the date and time of Baptism can be set.

(Office Use)

Date of Baptism: _____ Priest: _____