

Celebrant: _____

St. Thomas Aquinas & St. Martin of Tours Baptism Information Sheet

Req. Date: _____ Req. Time: _____

Baptism will take place at: St. Thomas Aquinas _____ St. Martin of Tours _____

Child's Name: _____ Child's DOB: _____

Child: Male _____ Female _____ City/State of Birth: _____

Father's Name: _____ Religion: _____

Mother's Name (Maiden): _____ Religion: _____

Parents Married: Yes _____ No _____ Place of Marriage: _____

Address: _____

Phone #: _____ Cell # _____

Email Address: _____

*****All Catholic Godparents MUST be: Confirmed, practicing Catholics, and (if married) in a marriage witnessed by a Catholic Priest or Deacon. They will need a letter of recommendation from their home parish or the church they attend regularly.*****

God Father: _____ Religion: _____

Parish they attend: _____ Confirmed? Y or N Letter Rec'd.: Y or N

God Mother: _____ Religion: _____

Parish they attend: _____ Confirmed? Y or N Letter Rec'd.: Y or N