

Holy Baptism

DATE OF APPLICATION _____, 20____

FULL NAME _____ SEX _____

RESIDENCE _____ AGE _____

FATHER'S FULL NAME _____

MOTHER'S MAIDEN NAME _____

PARENTS' RESIDENCE _____

PARENTS' TELEPHONE _____

RELIGIOUS AFFILIATION OF PARENTS _____

WITNESSES/SPONSORS

1. _____

RESIDENCE _____

2. _____

RESIDENCE _____

3. _____

RESIDENCE _____

DATE OF BIRTH _____

PLACE OF BIRTH _____

DATE OF BAPTISM _____ HOUR _____

PLACE OF BAPTISM _____

OFFICIANT _____

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