

**ST. JOSEPH PARISH
SACRAMENT OF BAPTISM
BAPTISMAL INFORMATION FORM**

OFFICE USE ONLY:

Date Received: _____

PART A: PARENT INFORMATION

| | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| ARE YOU REGISTERED WITH THE PARISH? (You would have filled in a parish registration form at some point) YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| FATHER | | MOTHER | |
| FIRST AND MIDDLE | LAST | FIRST AND MIDDLE | LAST |
| BAPTIZED CATHOLIC | YES <input type="checkbox"/> OR NO <input type="checkbox"/> | BAPTIZED CATHOLIC | YES <input type="checkbox"/> OR NO <input type="checkbox"/> |
| CONFIRMED CATHOLIC | YES <input type="checkbox"/> OR NO <input type="checkbox"/> | CONFIRMED CATHOLIC | YES <input type="checkbox"/> OR NO <input type="checkbox"/> |
| RELIGION IF NOT CATHOLIC | | RELIGION IF NOT CATHOLIC | |
| I am a parent of, or have legal custody of the child YES <input type="checkbox"/> / NO <input type="checkbox"/> | | I am a parent of, or have legal custody of the child YES <input type="checkbox"/> / NO <input type="checkbox"/> | |
| ARE YOU MARRIED? | YES <input type="checkbox"/> / NO <input type="checkbox"/> | IF YES, WAS IT IN A CATHOLIC CHURCH? | YES <input type="checkbox"/> / NO <input type="checkbox"/> |
| CHURCH OF MARRIAGE | NAME, CITY, PROVINCE, COUNTRY | DATE | Click here to enter text. |

PART B: CONTACT INFORMATION

| | | | |
|-------------------|-------------------|-------------------------|-------------|
| PRIMARY PHONE NO. | | SECONDARY PHONE NO. | |
| EMAIL | | | |
| FULL ADDRESS | STREET AND NUMBER | CITY, PROVINCE, COUNTRY | Postal Code |

PART C: CHILD INFORMATION

| | | | |
|---------------|----------|----------------|-----------------------------------------------------------------|
| FIRST | MIDDLE | LAST | |
| DATE OF BIRTH | MM/DD/YY | PLACE OF BIRTH | CITY, PROVINCE, COUNTRY |
| | | | MALE <input type="checkbox"/> / FEMALE <input type="checkbox"/> |

PART D: GODPARENT INFORMATION

Eligibility of Godparent(s):

Canon 873 There is to be only one male godparent or one female godparent or one of each.

The following are the requirements in order for a Catholic to be a godparent (canon 874 §1):

- at least 16 years of age
- he/she has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- in good standing with the Catholic Church: lives a life of faith which befits the role to be undertaken and not under canonical penalty
- not the father or mother of the one to be baptized

Eligibility of Christian Witness:

A Christian Witness for a child's baptism must be a validly baptized Christian of a non-Catholic Church (canon 874 §2)

A Christian Witness may only participate together with a Catholic sponsor (canon 874 §2)

Please note that if the godparent was not baptized Catholic, but were baptized into a different Christian denomination, then they will be considered a Christian Witness.

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------|
| GODMOTHER OR CHRISTIAN WITNESS | Name | CATHOLIC GODPARENT: BAPTIZED AND CONFIRMED YES <input type="checkbox"/> NO <input type="checkbox"/> |
| | CHRISTIAN DENOMINATION IF NOT CATHOLIC | OR: CHRISTIAN WITNESS: BAPTIZED OR CHRISTENED <input type="checkbox"/> |
| Fulfills the requirements of canon 874 §1 YES <input type="checkbox"/> / NO <input type="checkbox"/> OR Witness Fulfills the requirements of canon 874 § 2 YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| GODFATHER OR CHRISTIAN WITNESS | Name | CATHOLIC GODPARENT: BAPTIZED AND CONFIRMED YES <input type="checkbox"/> NO <input type="checkbox"/> |
| | CHRISTIAN DENOMINATION IF NOT CATHOLIC | OR: CHRISTIAN WITNESS: BAPTIZED OR CHRISTENED <input type="checkbox"/> |
| Fulfills the requirements of canon 874 §1 YES <input type="checkbox"/> / NO <input type="checkbox"/> OR Witness Fulfills the requirements of canon 874 § 2 YES <input type="checkbox"/> NO <input type="checkbox"/> | | |