



## Baptism Preparation Form

### PARENT'S INFORMATION

Father's Name: \_\_\_\_\_ Practicing Catholic: \_\_\_\_ Yes \_\_\_\_ No

Mother's Name: \_\_\_\_\_ Practicing Catholic: \_\_\_\_ Yes \_\_\_\_ No

Address: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_  
Mother Father

Members of St. Agnes Catholic Church: \_\_\_\_ Yes \_\_\_\_ No

### CHILD'S INFORMATION

Child's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Godmother: \_\_\_\_\_ Godfather: \_\_\_\_\_

### OFFICE USE

Date of Baptismal Class: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Time: \_\_\_\_\_ Godparents Verified: \_\_\_\_ Yes \_\_\_\_ No



## Baptism Preparation Form

### PARENT'S INFORMATION

Father's Name: \_\_\_\_\_ Practicing Catholic: \_\_\_\_ Yes \_\_\_\_ No

Mother's Name: \_\_\_\_\_ Practicing Catholic: \_\_\_\_ Yes \_\_\_\_ No

Address: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_  
Mother Father

Members of St. Agnes Catholic Church: \_\_\_\_ Yes \_\_\_\_ No

### CHILD'S INFORMATION

Child's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Godmother: \_\_\_\_\_ Godfather: \_\_\_\_\_

### OFFICE USE

Date of Baptismal Class: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Time: \_\_\_\_\_ Godparents Verified: \_\_\_\_ Yes \_\_\_\_ No