

ST. CATHERINE OF SIENA CHURCH
Mountain Lakes, NJ

BAPTISM ENROLLMENT SHEET

Date of Baptism _____

Name of Child _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

Date of Birth _____ City/State of Birth _____

Father's Full Name _____ Religion _____

Mother's First and Maiden Names _____ Religion _____

Church or Place Of Marriage:
Catholic _____ City _____
Non-Catholic _____ City _____
Civil _____ Not Married _____

Godfather _____

Godmother _____

Christian Witness _____ Religion _____

Is Either Godparent Represented by Proxy? Yes _____ No _____

Name of Proxy _____ Religion _____

Was Child Privately Baptized? Yes _____ No _____

Are You Registered in This Parish? Yes _____ No _____

Are You Practicing Catholics attending Sunday Mass? Yes _____ No _____

Have You Received the Sacrament of Confirmation? Father _____ Mother _____

If You Have Other Children, Are They in our Religious Education Program? Yes _____ No _____

If Not, Explain _____

Baptism Class Required _____ Date attended _____

Name of Presiding Priest or Deacon _____