

# BAPTISM REGISTER

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Town of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parish you are registered in: \_\_\_\_\_

*Date of Baptism:* \_\_\_\_\_

(Contact office at 563-927-4710 or dbq123sec1@dbqarch.org)

Father's Name: \_\_\_\_\_

(Include middle name)

Father's Religion: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

(Include middle name and maiden name)

Mother's Religion: \_\_\_\_\_

Are the child's parents married? \_\_\_\_\_

If so, were they married in the Catholic Church? \_\_\_\_\_

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

(Include middle name)

Is godfather a confirmed Catholic? \_\_\_\_\_

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

(Include middle name)

Is godmother a confirmed Catholic? \_\_\_\_\_

Is either godparent represented by proxy? \_\_\_\_\_

Name of proxy \_\_\_\_\_

Have you attended Baptism class? \_\_\_\_\_ Date: \_\_\_\_\_

Is this your first child? \_\_\_\_\_

Name of Priest/Deacon: \_\_\_\_\_

Number of pews to reserve: \_\_\_\_\_

A \$20 donation is suggested. (Revised 7/20/18)