



Perth-Huron Crossroads Catholic Family of Parishes

St. Patrick's Dublin | St. Patrick's Kinkora | St. James Seaforth | St. Vincent de Paul Mitchell

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Baptism Registration Form

Date Returned: _____ Baptism Preparation Meeting: _____ Baptism Date: _____

I. PARISH INFORMATION

At which parish do you wish to have your child baptized?

Name of Parish: _____ City: _____

☐ I am a registered member of _____ parish, located in _____

NOTE: If you are not a member of one of our parishes, written permission is required from your Parish.

II. CHILD'S INFORMATION

Full legal name of the child as it appears on the official birth certificate:

First Name _____ Middle Name(s) _____ Last Name _____
☐ Male ☐ Female Date of Birth: _____ City of Birth: _____

NOTES: *Permission of Both Parents/Legal Guardians is required.*
Legal documentation is required if the child is adopted.

III. PARENT'S INFORMATION

Mother (Full legal name):

First Name _____ Middle Name(s) _____ Last Name _____ Maiden Name _____

Religion: ☐ Roman Catholic ☐ Other: _____ ☐ None

Present Address: _____

Street _____ Box # _____ City _____ Postal Code _____
Home Phone: _____ Cell Phone _____ Email: _____

Father (Full legal name):

First Name _____ Middle Name(s) _____ Last Name _____

Religion: ☐ Roman Catholic ☐ Other: _____ ☐ None

Present Address: _____

Street _____ Box # _____ City _____ Postal Code _____
Home Phone: _____ Cell Phone _____ Email: _____

Parents are: ☐ Married ☐ Common Law ☐ Unmarried ☐ Separated ☐ Divorced

IV. SPONSOR'S INFORMATION (Godparent)

☐ One or two Sponsors/Godparents may be chosen.

A Sponsor must be:

☐ At least 16 years of age

☐ Fully initiated in the Catholic Church (received Baptism, Holy Communion, Confirmation)

☐ Not the father or mother of the one to be baptized

Sponsor 1 (Full legal name):

First Name

Middle Name(s)

Last Name

Sponsor 2 (Full legal name):

First Name

Middle Name(s)

Last Name

V. CHRISTIAN WITNESS INFORMATION

☐ I understand a Christian Witness for a child's baptism must be a baptized Christian

☐ I understand a Christian Witness may only participate together with a Catholic sponsor

Christian Witness (Full legal name):

First Name

Middle Name(s)

Last Name

☐ I will do my utmost to ensure my child is raised in the Catholic Faith.

Signature of Mother

Signature of Father

OTHER INFORMATION (including, but not limited to, the names and ages of other children in the family):

BAPTISMAL REGISTRATION FORM

Office Use Only

Presiding Priest/Deacon _____ Confirmed Date and Time of Baptism _____

Entered in DDMS _____ Church of Baptism _____

Recorded in Church Registry _____ Parents received Baptism Preparation _____

Certificate Mailed or Hand Delivered _____ Baptism Preparation with: _____