

Parish Office 979 849-2421 Fax 979 849-2425 Email ccang@mhtangleton.org

Baptismal Application

The following information is to be completed before the first session. Please be sure that the information on this form and the information on the birth certificate are exactly the same. **Registration form must be returned, and \$20 registration fee must be paid before beginning classes.**

Your child's baptism cannot be recorded in the permanent records without all the correct information. Also, a baptismal certificate cannot be issued until we have a copy of the child's birth certificate.

A copy of the child's <u>State or County Birth</u> Certificate must be turned into the office prior to the date of your child's baptism.

baptism. PLEASE PRINT CLEARLY												
				PLI	EASE I	PRINT	LEAR	KLY				
Child's La	Child's Last Name		First					Middle				
					of Birth /State)							
(1VIOHUI/D		Fathers	Information		/State)		Mother	s Info	rmation			
		- Taulets			1		Withti	3 11110				
Last Name							ne					
First Name							ne					
Middle						Middle						
Ethnicity						Ethnicity						
Home/Cell Phone	l					Home/Co						
Email						Email						
Address						Address		<u> </u>				
City			Zip Code		City State			Ī				
State		Zip Couc										
Religion Wore pare	te marrie	d in a Cath	nolic Church?	Y	N	Religion						
			one church.	1	14							
	Church, location, and date of marriage of child's parents											
Father sig	gnature X											
	ignature X											
GODPARENTS MUST be Roman Catholic and in full communion with the Catholic Church. (Must have received all their sacraments of initiation (Baptism, Confirmation, and Eucharist) and if married, they must be married in catholic church) Only one godparent is required, but if two, must be one male and one female.) Non-Catholics may not assume the role of Godparent.												
Г	Goo	dfathers	Information		T		Godmoth	ers In	formation			
Nome						Nome						
Name						Name						
Age						Age						
Religion Single/						Religion Single/						
Married						Married						
If married, name of church and city where marriage took place.							d, nam	e of church a	and city	y where mar	riage took place.	



Office Use Only:														
Completed Bapt	ism Packet	f												
Date parents sch				Clergy			Y	N						
Dates parents sc	r classes	Attended Sessi			Sessio	n	Y	N	Session	12	Y		N	
Dates godmother classes	d for			Attended Session			Y	N	Session 2		Y		N	
Dates godfather classes	for			Attended Session			Y	N	Session	12	Y		N	
Date Baptism sc			Baptis	m Date	n Date			During Mass			Ý	N		
Signature of Pre	sider											·		
Recorded in Vol		Page:		Item:	om· Cartif			ficate Mailed:						
Entered in comp				f Rirth Ca	ertificate –	Date			cate ivia	incu.				
		Amt, 1		Di iii Ci	Cash	Jan	Check		Credit Card		heck	#		