

BAPTISMAL INFORMATION

Everyone Must Complete This From

IF YOUR CHILD WAS BAPTIZED SOMEWHERE OTHER THAN ST. LAWRENCE, A COPY OF THE BAPTISMAL CERTIFICATE IS NEEDED IN ADDITION TO THIS FORM.

CANDIDATE NAME:				
	(Last)	(First)	(Middle)	
ADDRESS:				
(5	(Street number)		(Zip)	
PHONE NUMBER:				
FATHER'S NAME:				
	(Last)	(First)	(Middle)	(Faith)
MOTHER'S NAME:				
	(Maiden)	(First)	(Middle)	(Faith)
CHILD'S BIRTH:				
])	Date)	(City)	(State)	
AGE AT CONFIRMATION	<u> </u>			
CHURCH OF BAPTISM_		ch & Catholic or other Christian		
	(Name of churc	ch & Catholic or other Christian	n tradition)	
LOCATION OF CHURCH_			100000	
		(Street address)		
(City)		(State)	(Zip code)	
DATE OF BAPTISM/PROI	FESSION OF FAITH:			
CONFIRMATION NAME:				
SPONSOR'S NAME:				
SPONSOR'S ADDRESS: _				
		(Street address)		
(City)		(State)	(Zip)	

October 10, 2023