

GUARDIAN ANGEL CATHEDRAL

REQUEST FOR CHILD'S (6 YEARS OLD & YOUNGER) BAPTISM

TODAY'S DATE: _____ Month requested For Baptism: _____

CHILD'S FULL NAME: _____

DATE OF BIRTH: _____

CITY/STATE/COUNTY OF BIRTH: _____

FATHER: _____ Religion: _____
(Full Name)

BAPTIZED: YES _____ NO _____ CONFIRMED: YES _____ NO _____

MOTHER: _____ Religion: _____
(Full Name)

BAPTIZED: YES _____ NO _____ CONFIRMED: YES _____ NO _____

Married in Catholic Church Date: _____ Church: _____

Married civilly or in non-Catholic religious ceremony Date: _____

Place: _____

Unmarried, both parents on birth certificate: YES _____ NO _____

Single Parent only on birth certificate: _____

If either parent is a member of an Eastern Catholic Church, which parent and which ritual Church:

ADDRESS: _____

CITY/STATE/ZIPCODE: _____

BEST CONTACT TELEPHONE: _____

Parents may choose up to two godparents (sponsors) for their children from among family or friends qualified to serve in that capacity. Parents may choose a godfather and a godmother or just one godparent. There are no more than two godparents. Guardian Angel Cathedral will require all documentation indicating the suitability of chosen godparents (sponsors) before scheduling or confirming a Baptism date.

I consent to my child's baptism in the Catholic Church and realize that once baptized, the child must be raised in the practice of the Catholic faith by receiving the Sacraments of Holy Communion and Confirmation and attending Mass faithfully (*Code of Canon Law, Canon 868, § 1*).

(Father's Signature) Date: _____

(Mother's Signature) Date: _____

To be completed by Office Staff only:

Priest/Deacon: _____

Baptism Date Scheduled: YES // NO..... Date scheduled: _____

Sacramental Book Number: _____ Date Added: _____

Donation: _____

PDS: _____