
Last Name

Date and Time

Celebrant

St. Mark Catholic Church Baptism Registration

Child's Full Name _____ Age _____

Place of Birth _____ Date of Birth _____

Mother's Name (complete include maiden name) _____

Complete Address _____

Cell Phone _____ Email _____ Mother's Religion _____

Parish where you are registered _____ City and State _____

Sacraments Received (Circle all that apply): **Baptism** **First Communion** **Confirmation** **Marriage (if Catholic)**

Church where married (address) _____

Baptismal Preparation Class Date _____ Location: _____

Father's Name (complete) _____

Complete Address _____

Cell Phone _____ Email _____ Father's Religion _____

Parish where you are register _____ City and State _____

Sacraments Received (circle all that apply): **Baptism** **First Communion** **Confirmation** **Marriage (if Catholic)**

Church where married (address) _____

Baptismal Preparation Class Date _____ Location: _____

Godfather's Name (complete) _____

Complete Address _____

Home Phone _____ Email _____ Godfather's Religion _____

Parish where you are registered _____ City and State _____

Sacraments Received (circled all that apply): **Baptism** **First Communion** **Confirmation** **Marriage (if catholic)**

Church where married (address) _____

Baptismal Preparation Class date: _____ Location: _____

Godmother's Name (complete) _____

Complete Address _____

Home _____ Email _____ Godmother's Religion _____

Parish where you are registered _____ City and State _____

Sacraments Received (circle all that apply): **Baptism** **First Communion** **Confirmation** **Marriage (if Catholic)**

Church where married (address) _____

Baptismal Preparation Class Date _____ Location: _____

(Office Use Only)

Certificate Completed: Date: _____ By: _____ Entry in PDS: Date: _____ By: _____

Entry Parish Record: Date: _____ By: _____