

St Jude Parish-Baptism Registration Form

Date: _____ Name of Person Completing this Form: _____

Address: _____

Home # _____ Cell # _____ E-mail _____

<u>Child's Information</u>	<u>Father's Information</u>	<u>Mother's Information</u>
First & Middle Name: _____	Name: _____	Name: _____
Last Name: _____	Last Name: _____	Last Name: _____
Gender: Male _____ Female _____	Address: _____	Maiden Name: _____
Date of Birth: _____	City _____	Address: _____
Place of Birth: City and State _____	State _____ Zipcode _____	City _____
Hospital Name: _____	Home # _____	State _____ Zipcode _____
Adopted? _____ (Y/N)	Work # _____	Home # _____
Privately Baptized? _____ (Y/N)	Cell # _____	Work # _____
1. Is this the 1 st child you are baptizing? Y _____ N _____	E-Mail _____	Cell # _____
2. Have you attended a Baptism Preparation Class before? Y _____ N _____	Religion: _____	E-Mail _____
	Parish Of Registration: _____	Religion: _____
	Marriage Date: _____	Parish Of Registration: _____
	Marriage Place _____ (Parish name, City and State)	Marriage Date: _____
		Marriage Place _____ (Parish name, City and State)

Godfather's Name _____ Parish of Registration _____

Parish City/State _____

Godmother's Name _____ Parish of

Registration _____ Parish City/State _____

Required Documents

Copy of child's Birth Certificate

1. Sponsorship Certificates for Godparents from their parishes
2. If child is adopted, proof of adoption is required