

# Baptismal Information

**St. Joseph's Church | St. John the Baptist Church | St. Boniface Church**

*Turn this form into St. Joseph's Parish office – 106 6<sup>th</sup> St. W - Williston, ND 58801 – 701-572-6731*

## Child's Information

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Sex:  Male  Female

Date of Birth: \_\_\_\_\_ City, State of Birth: \_\_\_\_\_

Is this your first child? Y / N

Names of other children: \_\_\_\_\_ Is he/she Baptized? Y / N

\_\_\_\_\_ Is he/she Baptized? Y / N

\_\_\_\_\_ Is he/she Baptized? Y / N

\_\_\_\_\_ Is he/she Baptized? Y / N

## Parents' Information

Father's Legal First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Religion: \_\_\_\_\_ Does he practice his religious faith? Y / N

Phone Number: \_\_\_\_\_

Mother's Legal First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Maiden: \_\_\_\_\_

Religion: \_\_\_\_\_ Does she practice her religious faith? Y / N

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Are parents married? Y / N

Date: \_\_\_\_\_ City, State: \_\_\_\_\_

Did you get married in the Catholic Church? Y / N

Name of Parish: \_\_\_\_\_

If not, were you granted permission by the Catholic Church to do so? Y / N

Are parents registered members of St. Joseph's, St. John the Baptist, or St. Boniface Parish? Y / N (Underline which parish)

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**Sponsors' (Godparents') Information**

NOTICE: In order to serve as a *sponsor*, one must be a practicing Catholic and meet the requirements on the *Affidavit to Serve as Baptismal Sponsor* form given with this form. One (1) sponsor is required for the person to be baptized though two may be chosen. If two are chosen they must be of the opposite sex. If one wishes, a non-Catholic baptized person may be chosen instead of a second sponsor and would be considered a *Witness*. As a non-Catholic, the witness would not have the requirements of the Catholic party.

Catholic Male's Legal First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Catholic Female's Legal First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

(If there is a witness)

Witness's Legal First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Sex of witness:  Male  Female

If the sponsor(s) will not be present at the baptism, who will be the proxy(ies)?

Male \_\_\_\_\_

Female \_\_\_\_\_

Desired Date for Baptism: \_\_\_\_\_

May we print a baptismal notice in the bulletin following the baptism? Y / N

Person filling out this form: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Office use only:**

Date of meeting with priest/deacon: \_\_\_\_\_

Instructor: \_\_\_\_\_

Date Baptism took place: \_\_\_\_\_

Celebrant of Baptism: \_\_\_\_\_

Date recorded in Parish Register: \_\_\_\_\_