

# CONFIDENTIAL

For Office Use Only
Date of Bapt _____
Time of Bapt _____
Baptized by _____

## Mary, Queen of Peace Baptism Information

Today's Date: \_\_\_\_\_

**PLEASE PRINT CLEARLY USING LEGAL NAMES. A COPY OF THE BIRTH CERTIFICATE IS REQUIRED IN ORDER TO ASSURE THE ACCURACY OF THE REGISTER. BAPTISM CERTIFICATES WILL BE MADE FROM THIS INFORMATION.**

NAME OF CHILD: \_\_\_\_\_  
First Middle Last

PLACE OF BIRTH: \_\_\_\_\_  
City State

DATE OF CHILD'S BIRTH: \_\_\_\_\_ RACE OF CHILD \_\_\_\_\_ ETHNICITY OF CHILD: \_\_\_\_\_

NAME OF FATHER: \_\_\_\_\_  
First Middle Last

MOTHER'S MAIDEN NAME: \_\_\_\_\_  
First Middle Maiden

SPONSORS: 1. \_\_\_\_\_ REGISTERED AT MQP PARISH? \_\_\_\_

2. \_\_\_\_\_ REGISTERED AT MQP PARISH? \_\_\_\_

CHRISTIAN WITNESS: \_\_\_\_\_

NAME OF PROXY (WHEN APPROPRIATE): \_\_\_\_\_

PARENT'S CHURCH OF MARRIAGE: \_\_\_\_\_

REGISTERED IN PARISH: \_\_\_\_\_  
City State YES \_\_\_\_\_ NO \_\_\_\_\_

PERMISSION FROM HOME PARISH, IF NEEDED: YES \_\_\_\_\_ NO \_\_\_\_\_

BAPTISM BY: IMMERSION \_\_\_\_\_ SPRINKLING \_\_\_\_\_

HAVE YOU HAD AN INTERVIEW? YES \_\_\_\_\_ NO \_\_\_\_\_ ATTENDED BAPTISM CLASS? Date(mm/yy) \_\_\_\_\_

### **ALSO, COMPLETE THE FOLLOWING:**

HOME MAILING ADDRESS: \_\_\_\_\_  
Street address City State Zip

TELEPHONE: (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_  
Father Mother

EMAIL ADDRESS: \_\_\_\_\_

### **BELOW LINE FOR OFFICE USE ONLY**

Birth Certificate \_\_\_\_\_ Registry \_\_\_\_\_ Volume # \_\_\_\_\_  
Godparent verification \_\_\_\_\_ PDS \_\_\_\_\_ Page # \_\_\_\_\_  
Certificate \_\_\_\_\_ PDS Verification \_\_\_\_\_