



# Mother Seton Infant Baptism Registration Form

(Please print clearly as this information will be used to complete your child's Certificate)

<b>Child's Full Name:</b>			<b>Sex:</b> Male / Female	
First	Middle	Last Name		
<b>Date of Birth:</b> Month/Day/Year		<b>Place of Birth:</b> City State		
<b>Was the child previously baptized, due to an emergency?</b> Yes / No			<b>Was the child adopted?</b> Yes / No	
<b>Father's Full Name:</b>			<b>Religion</b>	
First	Middle	Last Name		
<b>Mother's Full Name:</b>			<b>Religion</b>	
First	Middle	Last Name		
<b>Address:</b>			<b>Apt. #</b>	
<b>City:</b>		<b>State:</b>	<b>Zip Code:</b>	
<b>Telephone (Cell):</b>		<b>Email:</b>		
<b>Is Family Registered in Mother Seton Parish:</b> Yes / No				
<b>Were Parents Married by a Catholic Priest/Deacon?</b> Yes / No <b>Date of Marriage:</b>				
<b>Where married:</b>				
Parish:		City and State:		

<b>Godfather's Name:</b>			<b>Religion:</b>	
			<b>Parish:</b>	
First	Middle	Last Name		
<b>Godmother's Name:</b>			<b>Religion:</b>	
			<b>Parish:</b>	
First	Middle	Last Name		

<b>Proxies' Name:</b>			<b>Religion:</b>	
First	Middle	Last Name		
<b>Proxies' Name:</b>			<b>Religion:</b>	
First	Middle	Last Name		
(One or more must be a Confirmed / practicing Catholic. A Baptized Non-Catholic may serve as a Christian Witness.)				
<b>Date of Baptism Prep Class:</b>			<b>Preferred Baptism Date:</b>	
<b>Do you have any questions / needs of which we should be aware?</b>				

For Office use:

<b>Recorded:</b>	<b>Date of Baptism</b>	<b>Celebrant Signature:</b>