

Pre-Baptismal Information

St. Joseph Catholic Church

(circle one)

Christ the King Church

Name of Child: _____

First Name

Middle Name

Last Name

Date of Birth: _____

Month/Date/Year

Place of Birth: _____

City/State

Date of Baptism: _____

Month/Date/Year

Time: _____

During or after Mass

Father's Name: _____

First Name

Middle Name

Last Name

Mother's Name: _____

First Name

Middle Name

Last (**Maiden**) Name

Home address: _____

Phone Number: (Home) _____

(Cell) _____

Sponsors: _____

Godfather's Name

Religion: _____

Godmother's Name

Religion: _____

Church of Marriage: _____

City/State