

Parish Family of St. Robert Bellarmine

Baptism Registration

*Please be aware that the information provided HERE will be the information on the Baptismal Certificate!!!
PLEASE PRINT CLEARLY*

Date of Baptism: _____

Full Name of Child: _____

Date of Birth: _____

Child's place of birth (City & State): _____

Was the child privately baptized? _____

Was the child adopted? _____

Father's Name: _____ Religion: _____

Mother's First & Maiden Name _____ Religion: _____

Residence: _____

Telephone Number: _____ Email: _____

Are you registered at St. Robert's? _____ How Long? _____

Were parents married in the Catholic Church? _____

Godfather: _____ Religion: _____

Godmother: _____ Religion: _____

Name of Proxy (if applicable): _____

Office Use Only

Information Supplied (Date: _____ Email _____ Faxed _____ In Person _____)

Baptismal Prep. Session Attended: _____

Eligibility Forms: (Godfather) _____ (Godmother) _____

Letter of Suitability _____

Additional Information: _____

Received by: _____ (Staff)

****First Time Parents attendance in a Baptismal Preparation Class
is required by child's parent/(s) prior to the Baptism*****

All required documents must be submitted along with this Registration Form before a Baptism can be scheduled.