



SACRED HEART

ROMAN CATHOLIC CHURCH | CALGARY
2020 BAPTISM REGISTRATION FORM

NOTES:

CHILD AND FAMILY INFORMATION

CHILD'S FIRST NAME _____ CHILD'S LAST NAME _____ DATE OF BIRTH: MONTH / DAY / YEAR _____
 CHILD'S CITY AND COUNTRY OF BIRTH _____ IS THIS YOUR FIRST CHILD? YES NO ARE YOU A REGISTERED PARISHIONER? YES NO
 FATHER'S FIRST AND LAST NAME _____ RELIGION _____
 MOTHER'S FIRST AND MAIDEN NAME _____ RELIGION _____
 HOME PHONE _____ CELL PHONE (FATHER'S, MOTHER'S) _____
 EMAIL ADDRESS _____
 MAILING ADDRESS _____ POSTAL CODE _____

PARENTS' MARITAL STATUS

<input type="checkbox"/> CIVIL MARRIAGE	<input type="checkbox"/> CATHOLIC CHURCH MARRIAGE	<input type="checkbox"/> _____ OTHER _____
CATHOLIC CHURCH OF MARRIAGE (FULL NAME)		
CITY		COUNTRY

CHILD AND FAMILY INFORMATION

GODFATHER'S FIRST AND LAST NAME _____ RELIGION _____
 GODMOTHER'S FIRST AND LAST NAME _____ RELIGION _____
 PROXY'S FIRST AND LAST NAME (only if required) _____
 INTERVIEW DATE WITH PASTOR: MM/DD/YYYY _____ DATE OF BAPTISM PREP COURSE: MM/DD/YYYY _____ DATE OF BAPTISM: MM/DD/YYYY _____

BAPTISM INFORMATION

I, the parent of this child, am practicing my Catholic faith weekly and in my daily life and will raise this child in the practice of the Roman Catholic religion, especially the weekly celebration of the Eucharist, the other sacraments, the scriptures, and the prayers. I promise to support my spouse in doing so.

FATHER'S SIGNATURE _____ MOTHER'S SIGNATURE _____