

**TRIUMPH OF THE CROSS PARISH
BAPTISM REGISTRATION FORM**

Name of Child _____ M or F (circle one)
(First) (Middle) (Last)

Home Address: _____

City / State / Zip code: _____ / _____ / _____

Telephone # (_____) _____ email address: _____

Date of Birth: (month) _____ (day) _____ (year) _____

Place of Birth: (city) _____ (state) _____

Date of Baptism: _____ Holy Rosary Church

Time of Baptism: _____

Legal Name of Father: _____
(First) (Middle) (Last)

Religion of Father: _____

Legal Name of Mother: _____ (Maiden) _____
(First) (Middle) (Last)

Religion of Mother: _____

Is the marriage of the parents sacramental? (yes) _____ (no) _____ (Please check one)

One Godparent must be an active, fully initiated Catholic and the other witness either a Catholic or a baptized Christian. Sponsors living outside of Triumph of the Cross must have a Sponsor certificate from their pastor.

Name of Godfather / witness: _____

Religion of the Godfather / witness: _____

Name of Godmother / witness: _____

Religion of the Godmother /witness: _____

Will either godparent be represented by proxy? (yes) _____ (no) _____ (Please check one)

If yes, the name of proxy: _____

Was the child adopted? (yes) _____ (no) _____ (Please check one)

Was the child privately baptized? (yes) _____ (no) _____ (Please check one)

Date the parents attended the Baptismal preparation class: _____

If the family is not registered in Triumph of the Cross, do we have the letter of their pastor's approval?
(yes) _____ (no) _____ (Please check one)

Name of the Priest or Deacon performing the Baptism: _____

Office notations:

____ The Baptismal preparation team has been notified of the status of this baptism.

____ Completion of Baptismal Class Yes: Date _____ No: why _____

____ The Date has been scheduled on the Triumph of the Cross Calendar.

____ The sacramental recording has taken place (Baptismal Book and PIM).