

Mary Star of the Sea Parish
BAPTISM REGISTRATION

Child's Last Name		First	Middle
Date of Birth		City and State of Birth	
Parent's Address: Street	Apt #	City	Zip Code
Home Phone Number		Work Phone Number	Cellular or Pager
Father's Last Name		Father's First Name	Religion
Is father baptized Catholic?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Communion?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Confirmation?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I attend Mass:		<input type="checkbox"/> Weekly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never	
Have you previously attended a pre-baptismal program?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when?		Where?	
Mother's Maiden Name		Mother's First Name	Religion
Is mother baptized Catholic?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Communion?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Confirmation?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I attend Mass:		<input type="checkbox"/> Weekly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never	
Have you previously attended a pre-baptismal program?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when?		Where?	
Are parents married?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Married in the Catholic Church?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you registered at Mary Star of the Sea Parish?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Would you like to be registered?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Baptism

Mary Star of the Sea Parish
BAPTISM REGISTRATION

Godfather's Name			
Over 16 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Baptized Catholic?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
First Communion?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Confirmed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Attends Mass?	Weekly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never <input type="checkbox"/>		
Married?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If married, was marriage witnessed by Catholic priest?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Godmother's Name			
Over 16 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Baptized Catholic?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
First Communion?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Confirmed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Attends Mass?	Weekly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never <input type="checkbox"/>		
Married?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If married, was marriage witnessed by Catholic priest?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>_____ or _____ Date</p> <p><i>Signature of Father</i> <i>Signature of Mother</i></p>			
Suggested Offering \$50.00			
***** FOR OFFICE USE ONLY *****			
_____		_____	
<i>Signature of Interviewer</i>		<i>Date of Class</i>	
Registration Fee Received			
Pre-Baptismal Class Attendance			
		Date	
Father			
Mother			
Godfather			
Godmother			
Date of Baptism			