

Holy Baptism

PLEASE PRINT CLEARLY

Date of Application _____ Date of Baptism (m/d/yy) _____

Full Name _____ Gender _____

Address _____

City, Zip Code _____

Telephone No. _____

Date of Birth (m/d/yy) _____

Place of Birth _____

Parent's Full Name _____

Parent's Full Name _____

Religious Affiliation of Parents _____

Godparents _____
