## **BAPTISMAL REGISTER INFORMATION**

Registered at St. Matthew Church?	Envelope #:	
Child's Full Birth Name:		(Class Date)
*( <u>copy of ch</u>	ild's birth certificate requir	<u>ed</u> )*
Date of Birth:	City & State of Birth:	
Address/City/State:		& Zipcode
Family telephone #:	Other #:	Date:
Father's Full Birth Name:		
Sacraments <u>Received</u> : <u>Baptism</u> -() <u>Confession</u>		(Religious Denomination)
Mother's Full Birth Name:		
		(Religious Denomination)
Sacraments <u>Received</u> : <u>Baptism</u> -() <u>Confessi</u>	on/Reconciliation-() <u>Euch</u>	arist/Communion-() Confirmation-()
Mother's Current Full Legal Name:		
Roman Catholic Marriage (or Convalidat	ion)? ( <u>IF NOT</u>	) - Married by court (civilly)?
If not married in the Catholic Church, are	e there any previous marria	
If yes - (husband?) - (wife?		*(pastoral clearance required)*
Sponsor's Name:	Must be	a fully Initiated Confirmed Catholic
Sponsor's Name:	Must be	a fully Initiated Confirmed Catholic
("Sponsor Form" or "Letter of Eligibility	or and certificate of baptism	class needed from Sponsor's church).
Notations:		
Names of proxy:		
A Proxy is <u>for Spon</u>	sor "not" attending baptisn	<u>u</u> )
If child is adopted, please provide adoption	n papers: Notati	ions:
Has child been privately baptized or in an	other Christian Denominat	ion?
Office Notes:		
Recorded: (Vol. ) (Page ) (#_	)	
Name of Priest or Deacon:	Dat	te of Baptism:
Amt: \$ Check # or Cas	h Birth Certificat	e Given /Mailed: