

# Roman Catholic Church of Saint Christopher & Saint Sylvia

7411 South Broadway, Red Hook, NY 12571

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## BAPTISM INFORMATION SHEET

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birthplace \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Religion \_\_\_\_\_

Married by a Catholic Priest Y \_\_\_ N \_\_\_ Name of Church \_\_\_\_\_

Registered with Parish of \_\_\_\_\_

Contact Information:

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name of Godfather \_\_\_\_\_ Religion \_\_\_\_\_

Name of Godmother \_\_\_\_\_ Religion \_\_\_\_\_

Is either Godparent represented by proxy? Y \_\_\_ N \_\_\_

Name of Proxy \_\_\_\_\_

Was child privately baptized? Y \_\_\_ N \_\_\_ Was child adopted? Y \_\_\_ N \_\_\_

Does child have siblings? Y \_\_\_ N \_\_\_ Please list siblings below:

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Requested Date of Baptism \_\_\_\_\_ Time \_\_\_\_\_

Name of Priest /Deacon \_\_\_\_\_

Donation: \_\_\_\_\_

Notes: