

Baptismal Information Form

Please complete the following information. **If your child was not baptized at Holy Name Church, you must submit a copy of the original baptismal certificate.** It is the policy of the Archdiocese of Detroit that we see the original, and have a photo copy (only) of the original.

Child's First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth: _____ Parent email: _____

Home Address: _____

City and Zip Code: _____

Home Phone: _____ Cell Phone: _____ (circle: Mom or Dad)

School Attending: _____

Record of Baptism

If you have not submitted a copy of your child's baptismal certificate **please attach it to this form.** ***If your child was baptized at Holy Name we do not need the baptismal certificate.*** We do need you to **fill in the date of baptism on this form.**

My child was baptized at Holy Name: YES / NO (please circle answer)

***Date of Baptism:** _____ **Church of Baptism:** _____

Address of Church of Baptism: (City, State, Zip Code): _____

Family Information

Father's Full Name: (please print) _____

Mother's Full Name: _____ Maiden Name: _____