

Baptismal Information Form 2019-2020

Please complete the following information: (PRINT CLEARLY)	
Child's First Name:	Middle Name:	
Child's Last Name:		_
Date of Birth:	(Month, Day, Year)	
School Attending:		_
Record	of Baptism	
My child was baptized at <i>Holy Name Church</i> : YE Date of Baptism: (Mor	The state of the s	
If <u>not</u> baptized at Holy Name Church, Birmingha	am, please provide the following inform	ation:
Church of Baptism:		
Address of Church of Baptism: Street:		
City:		
Postal Code: Country:		
Family I	Information	
Father's Full Name:		
Mother's Full Name:		
Mother's Maiden Name:		
Home Address:		
City and Zip Code:		
Home Phone: Cell P	hone: (circle: M	lom or Dad)
Parent's primary email:	(circle: Mom o	r Dad)