



# HOLY FAMILY CHURCH

## Baptismal Registration Form

PLEASE PRINT

Requested Date for Baptism \_\_\_\_\_ (Please attach a copy of baby's Birth Certificate)

OFFICE ONLY:  
Date: received and initial \_\_\_\_\_ DONATION: date received & initial \_\_\_\_\_

Name of child to be baptized: \_\_\_\_\_

Date of birth: \_\_\_\_\_ gender \_\_\_\_\_ City of birth: \_\_\_\_\_

PARENTS

Father's full Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's full name: \_\_\_\_\_ Religion: \_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell #: (\_\_\_\_) \_\_\_\_\_ Home #: (\_\_\_\_) \_\_\_\_\_ work #: (\_\_\_\_) \_\_\_\_\_

Registered Parishioner Family Name: \_\_\_\_\_ Envelope # \_\_\_\_\_

GODPARENTS (sponsors)

Only one sponsor is required to be an active Catholic who is at least 16 years of age, confirmed and has already received the Sacrament of the Holy Eucharist. Any non-Catholic baptized person may act as a Christian witness.

Sponsor's Name \_\_\_\_\_ Catholic? \_\_\_\_\_

If not Catholic, what faith tradition do you follow? \_\_\_\_\_

Sponsor's Name \_\_\_\_\_ Catholic? \_\_\_\_\_

If not Catholic, what faith tradition do you follow? \_\_\_\_\_

Please do not write below this line:

Baptized by Reverend: \_\_\_\_\_ Actual Baptism Date: \_\_\_\_\_

- Parish Soft  Baptism Book  Excel  Print  Sent  Sacramental Register

HOLY FAMILY is a welcoming Catholic Eucharistic community of disciples connecting faith with life and reaching out to those in need.

1527 Fremont Avenue ■ South Pasadena ■ California 91030-3736

Telephone 626.799.8908 ■ Facsimile 626.799.0423 ■ email reception@holymfamily.org

These preparation sessions must be completed prior to scheduling a baptism date. Thank you.

*Baptismal Parent Preparation Session (Sunday at Holy Family Church)*

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Date and place of completion

*Baptismal Parent/Godparent Preparation Session (Tuesday at Holy Family Church)*

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Date of completion