

Holy Infancy Church

Roman Catholic Diocese of Allentown

Baptism Registration Form



Interview/Registration Date: _____

Family Name of Child: _____

First and Middle Name of Child: _____

City of Birth _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email _____

Father's Full Name: _____

Mother's First Name: _____ Maiden Name: _____

- Religion of the Father: _____ - Religion of the Mother: _____

Parents Married in the Catholic Church? (if so when/where?) _____

Parents Registered in the Parish? _____ (If not, then they must register if from our parish)

Attending Mass regularly? _____ (If not, then they must commit to God to begin now)

Godfather's Name: _____ Religion: _____

Godmother's Name: _____ Religion: _____

Watched Videos/class on Formed.org? Father: _____ Mother: _____ Godfather: _____ Godmother: _____

Baptism Date: _____ Language: English: _____ Spanish: _____ Portuguese: _____

Celebrant (if specified): _____

Additional Notes: