

ST. MARY'S PARISH

209 Third Street, Jersey City, NJ 07302 Phone: (201) 434-8500 Fax: (201) 333-1816

BAPTISM REQUEST FORM

Today's Date	Date Requested for Baptism			
Date	request for Pr	e-Baptismal C	Class	
CHILD INFORMATION				
First Name	Middle	Last N	ame	
Date of Birth	Place of Birth			
Mailing Address:				
Street			Apt#	
City		State	Zip	
Telephone number			· · · · · · · · · · · · · · · · · · ·	
Email				
FATHER		MOTHER		
Last Name	Maide	n Name		
First Name	First N	First Name		
Religion_	Religi	on		
Are the Parents married? Yes	No (1	lf it is Yes Civi	l □ Church□)	
	GODPAREN	ITS		
Godfather:	Godmotl	her:	<u>.</u>	
Are you confirmed? 1. Yes No A Maximum of two sponsors will be received are free to choose a male or a female one male and one female (Canon law #8' Catholic and the second one must be a Cifer office use only:	e. However, if you 72-874). At least of hristian.	smal record, if y a wish to have tv	vo godparents, there must be	
Date Attended to the Pre-baptismal Class Documents submitted: Child's Birth Cert Godparent's certificate or Sponsor letter	tificate Yes			

****IF FOR ANY REASON YOU ARE UNABLE TO ATTEND THE CLASS OR SCHEDULED BAPTISM, PLEASE HAVE THE COURTESY TO CALL the Parish Office prior to the Baptism at (201) 434-8500.****