

Baptismal Questionnaire (Please print)

1. Full name of child to be baptized: _____

Date of Birth: ____/____/____ City & State of Birth: _____

2. Family information

Father's name: _____ Catholic? _____

Mother's full maiden name: _____ Catholic? _____

Home Phone number: (____) _____ Alternative phone number: (____) _____

Address: _____

City, State, Zip Code: _____

E-mail address: _____

3. Have the parents been married in the Catholic Church? _____ Wedding date: ____/____/____

Where did marriage take place? _____ Officiant: _____

4. Are you registered as parishioners at St. Dominic's Church? (yes/no) _____

If yes, how long have you attended St. Dominic's? _____ What Mass does your family attend? _____

Why are you seeking baptism for your child? _____

5. Have you had any other children baptized? _____ Who? _____ When? _____

6. **Godparent Information:** Both godparents must be baptized. At least one of the godparents must be a baptized, confirmed, practicing Roman Catholic. The godparents share with the parents the responsibility for raising the child in the Catholic faith. If a godparent is not Catholic, please list the religion in which they are baptized.

Name of Godfather: _____ Catholic? _____

Name/location of parish? _____ Diocese: _____

Letter of good standing received? _____ Attended baptism class/Date: _____

Name of Godmother: _____ Catholic? _____

Name/location of parish? _____ Diocese: _____

Letter of good standing received? _____ Attended baptism class/Date: _____

9. When did you attend the baptismal preparation class at St. Dominic's? ____/____/____ The class is offered at St. Dominic's on the third Monday of every month at 7:30 p.m. We require both parents and at least one of the godparents to attend one of the classes. If the godparents live out of town, they may attend a class at their local parish.

10. How many guests do you expect at the baptism? _____ (For 20 people or fewer, the Baptism will be scheduled in the Baptistery; for more than 20 people, the Baptism will be scheduled in the Lady Chapel)

In asking the Church to baptize my child, I accept the responsibility to try and raise my child in the faith, to accompany him or her to Sunday Mass when the age of reason is reached, to ensure he or she receives faith education, and to provide a loving, prayerful Christian family life to the best of my ability.

Father's signature

Mother's signature

____/____/____
Date

Baptismal Questionnaire

Box to be filled out by St. Dominic's Parish staff

Date of Baptism: _____ / _____ / _____ **Time:** _____ **LC:** _____ **B:** _____

Celebrant: _____ **Number of guests:** _____

Date of class attended by Parents: : _____ / _____ / _____ **Date of class attended by Godparents:** _____ / _____ / _____

Confirmation sent (yes/no): _____

Readings chosen: _____

Godparents' letters of good standing received: Godfather: _____ **Godmother:** _____

Notes/Exceptions: _____