

Baptism Registration...Date of Baptism: _____

St. Patrick Church

St. Rose of Lima Church

Name of Child **First** _____ **Middle** _____ **Last** _____

Address: _____

Email Address: _____ Phone# _____

Child's Date of Birth: _____

City/ State of Birth: _____

Father's Name: _____ Religion: _____

If Catholic Answer: Baptism: _____ Communion: _____ Confirmation: _____

Is Father Attending Mass? _____

Mother's First Name: _____ Mother's Maiden Name: _____ Religion: _____

If Catholic Answer: Baptism: _____ Communion: _____ Confirmation: _____

Is Mother Attending Mass? _____

Are you married? _____

Were you married in the Catholic Church? _____

Name of Church you were married in? _____

God Father's Name: _____ Is Godfather Catholic? _____

God Mother's Name: _____ Is Godmother Catholic? _____

*God Parents must present sponsorship certificates from their registered church at least
1 week prior to baptism*

Was the child adopted? _____

Has the adoption been finalized? _____

Have you taken baptism class with a previous child? _____

Sacramental fee is \$50– Please make check payable to St Patrick or St. Rose of Lima and return to Office
at 327 Greenwich Street Belvidere, New Jersey 07823

Sponsor Certificates: _____
Baptism Class Complete: _____
Attending Priest/ Deacon: _____
Payment Received: \$ _____