## **Cathedral Basilica of Saint Augustine Baptism Preparation Information**

Baptisms are held as follows:
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• 1st Sunday of the Month during 11:00 AM Mass	Office Use Only
• 3 <sup>rd</sup> Sunday of the Month after the 11:00 AM Mass	Date
Baptisms are not celebrated during Mass during Lent  N. D. J. C. J. D. J. D. J. C. J. D. J. C. J. D. J. C. J. D. J. C. J. D. J. D. J. C. J. D. J. C. J. D. J.	Time
No Baptisms are permitted on Palm Sunday weekend,  Compact Christic Soundary and American Sunday weekend,	Priest
Corpus Christi Sunday, or during special events	Location
INFORMATION ABOUT CHILD (Please fill out com	pletely and in print)
MaleFemale	
Full Name of Child	
Unborn – Expected Date of Birth:	_
Born Place and Date of Birth:	
· Adopted – Notes:	
INFORMATION ABOUT PARENTS	
Father's Full Name	Religion:
Mothers Full Name:	Religion:
Mother's Maiden Name:	
AddressCity/State	Zip
Home Phone Work Phone	Cell Phone
Email Address(s)	
Are you registered at the Cathedral YesNo	If Yes, How Long?
As parents of the child to be baptized, were you married in the Catholic Chur As a single parent of the child to be baptized, are you: SingleDivorcedSeparatedSpouse Deceased_	<u> </u>
INFORMATION ABOUT GODPARENTS	
Godfather's Name	Religion
Is Godfather baptized YesNo1st Communion: YesNoC Is Godfather registered at Cathedral YesNo	Confirmed: YesNo
If No, name and place of his parish/Church	
Godmother's Name	Religion_
Is Godmother baptized Yes No 1st Communion Yes No 0	
Is the Godmother registered at the Cathedral? YesNo	<u> </u>
If No, name and place of her parish/Church	
INFORMATION FOR BAPTISMS DONE FOR NON-PARISHIONERS	
Name of Home Parish:Address	
Name of Parish Priest_	

Do you have a letter of permission from your Pastor? Yes\_\_\_ No\_\_\_

Do you have a letter stating you have completed baptismal preparation sessions? Yes\_\_\_ No\_\_\_

## For office use only

Date parents attended Baptism Class and facilitator:
Name of Priest who presided at the Baptism:
Dates and times when family was contacted:
NOTES:
form revised 3/3/2020