

CANADIAN MARTYRS CATHOLIC PARISH
BAPTISM RECORD INFORMATION

Registration date: _____

Child's Last Name _____ First Name _____

Father's Last Name _____ First Name _____

Mother's Last Name _____ First Name _____

Mother's Maiden Name _____

Child's Date of Birth _____ City of Birth _____

Mother's Religion _____ Baptized? _____ Year: _____

Father's Religion _____ Baptized? _____ Year: _____

Parent's Address _____

Phone (H) _____ (C) _____

Email address _____

Church where parents were married: _____

Date of marriage: _____ City: _____

Godmother's Name _____ Religion _____

Godfather's Name _____ Religion _____

Parents registered at Canadian Martyrs? _____ Attendance Pattern: _____

Date of Interview with Parish priest: _____

Date Baptism Course Completed: _____ Instructor(s): _____

Tentative Baptism Date: _____ Time: _____

Confirmed Baptism Date: _____ Time _____

Additional Notes: _____
