**BAPTISM REGISTRATION FORM**  
St Maximilian Kolbe Parish

**PLEASE PRINT**

Baptismal date requested ***(confirmed once all paperwork is received)*** Click here to enter a date.

Full name of person to be baptized: Click here to enter text. *(check one)* M OR F

City of birth: Click here to enter text. State: Click here to enter text. Birth date: Click here to enter a date.

Present address: Click here to enter text. City, State, Zip: Click here to enter text.

Phone #: Click here to enter text. Email: Click here to enter text.

Father’s Name: Click here to enter text.

Mother’s First Name and Maiden Name: Click here to enter text.

**PARENTS**

Married at: Click here to enter text. Date: Click here to enter a date.

We have celebrated the Sacrament of Marriage in the Catholic Church. *(check one)* Yes OR No

**CATHOLIC GODPARENTS\***

*Check the godparent form for the requirements to be a Catholic godparent.*

(**Male**) Catholic godparent: Click here to enter text.

(**Female**) Catholic godparent: Click here to enter text.

\* *If desired, a baptized non-Catholic may stand with the Catholic godparent as a Christian witness.*

**SCHEDULING BAPTISM**

Completed baptism registration form

Completed baptism preparation class or verification of previous baptismal preparation class participation

Godparent forms, signed by the pastor of the godparent’s church and submitted to our parish office

Once all forms have been received, you will be contacted by the parish office to schedule the baptism

If a family wishes, they may make a donation for the baptismal cloth and candle.