(Office	I Ico	Only	i
(Office	USE	Office	1

Date	Time	Celebrant

(Name and Date)

CHURCH OF THE ANNUNCIATION BAPTISM APPLICATION

(to be completed by the parents)

	(to be completed	by the parents	5)	
ild's Name:				
(First)	(Middle)		(Last)	
rth Date:				
ula a wl a Nila wa a c				
ther's Name:	(Middle)		(Last)	
other's Name:	,		, ,	
(First)	(Middle)		(Maiden)	(Last)
ther's Religion:	M	Mother's Religion:		
ldress:				
 ome Phone:	Cell:		Email:	
rents Married by Catholic Priest or [(Yes)	(No – Explain	
mily Registered at Annunciation Par		(Yes)		
as child privately baptized (emergen		(No)		
siting celebrant desired:	-	(No)	(Yes – Explain	OII DACK)
odfather's Name:				
(First)	,	Middle)	(Last	t)
odfather's Religion:				
odmother's Name:				
(First)	1)	Middle)	lle) (Last)	
odmother's Religion:				
you are planning to have a proxy sta	nd in for either god	parent, please	e inform us as soon as	possible.
oxy for Godfather:				
(First)	1)	Middle)	(Last	t)
oxy's Religion:			•	
oxy for Godmother:				
(First)		Middle)	(Las	 t)
oxy's Religion:			(203)	-1
vish to have my child baptized at Ani	nunciation Church.	I certify that	I am a practicing Cath	olic.
gnature of Catholic Parent				 Date
_				2410
	this form with a mi			
Checks co	an be made out to: (Annunciation.	
	FOR OFFICE	USE ONLY		

Baptism Class: ____ (Attended) ____ (Excused) ____ (Elsewhere) ____