

## Cathedral of the Annunciation

## REQUEST FOR THE SACRAMENT OF BAPTISM

We,					
Father's Full name:					
	First	Middle	Last		
Mother's full name:					
•	First	Middle	Maiden name		
The Parents of:					
Name of child:					
Born in:			on:		
	City	State	Date		
Request the Sacrament of Baptism for our Child					
We have chosen for	or Godparents	:			
Godfather's name:					
	First	Middle	Last		
	Codfathou's Day	sial / City			
	Godfather's Parish / City				
Godmother's name:					
	First	Middle	Last		
	Godmother's Parish / City				
		ause they are Baptized, Confi o our child because they are li	rmed, Married by the Church (if iving their faith.		
Our Address:					
		Mailing address			
			7: 0.1		
	City		Zip Code		
_	Home <u>p</u> hone		Work Phone		
We are: ☐ Married by a	Priest	villy □Living Together □Divor	ced □Single Parent □Separated		
Father's Signature		$\overline{N}$	Mother's Signature		

## For Office Use Only

The Pa	arents participated in the Pre-Baptismal sessions on:			
The G	odparents participated in the Pre-Baptismal sessions on:			
	Letter received from Godparent's Parish [if other than Annunciation]			
	Family registered at Annunciation			
	Family is from another Parish / Letter of Permission			
The da	ate requested for Baptism:			
	Baptism Celebrated on:			
	Minister of the Sacrament:			
	Baptism Recorded:			
	Certificate given / sent:			