



Saint Hedwig Catholic Church

11482 Los Alamitos Blvd.
Phone: (562) 296-9000, Fax: (562) 296-9099
www.sainthedwigparish.org

Baptism Registration Form

Please complete the fields below and return completed form to the parish office, along with a copy of a birth certificate from the county, copies of Preparation Class certificates (if applicable) and \$100.00 registration fee.

Child's Information

Full Legal Name: _____
First Middle Last Suffix

Date of Birth: _____ Age: _____ Place of Birth: _____
MM/DD/YYYY City, State

Address: _____
Address City, State Zip Code

Was the child adopted? Yes No Was there an emergency baptism? Yes No

Parent's Information

Father's Full Legal Name: _____
First Middle Last Suffix

Contact Number: () - Religion: Catholic Other: _____

E-mail: _____ Parishioner: Yes No

Mother's Full Legal Maiden Name: _____
First Middle Last Suffix

Contact Number: () - Religion: Catholic Other: _____

E-mail: _____ Parishioner: Yes No

Are you married in the Catholic Church? Yes No Name of Church: _____

Godparent(s) and Sponsor's Information

Please note: **one** Godparent is required. A **second** Godparent of the opposite gender or a Sponsor (serve as a Christian Witness) is also acceptable.

Godfather's Full Legal Name: _____
First Middle Last Suffix

Requirements for Godfather:
Is he: +16 years old Baptized Catholic Has he received: First Communion Confirmation

Home Parish: _____
Name of Church City, State

Godmother's Full Legal Name: _____
First Middle Last Suffix

Requirements for Godmother:
Is she: +16 years old Baptized Catholic Has she received: First Communion Confirmation

Home Parish: _____
Name of Church City, State

Christian Witness' Full Legal Name: _____
First Middle Last Suffix

Requirements for Sponsor (Christian Witness):
Is he/she: +16 years old Baptized Christian Denomination: _____

Parent's Name (Print) Parent's Signature Today's Date Desired Baptism Date

Baptismal Preparation Class

Father's Full Legal Name: _____
First Middle Last Suffix

Phone: () - Email: _____

Registered for Class at St. Hedwig: Yes; Class date: _____
 *No; Taken at: _____

Mother's Full Legal Maiden Name: _____
First Middle Last Suffix

Phone: () - Email: _____

Registered for Class at St. Hedwig: Yes; Class date: _____
 *No; Taken at: _____

Godfather's Full Legal Name: _____
First Middle Last Suffix

Phone: () - Email: _____

Registered for Class at St. Hedwig: Yes; Class date: _____
 *No; Taken at: _____

Godmother's Full Legal Name: _____
First Middle Last Suffix

Phone: () - Email: _____

Registered for Class at St. Hedwig: Yes; Class date: _____
 *No; Taken at: _____

Christian Witness' Full Legal Name: _____
First Middle Last Suffix

Phone: () - Email: _____

Registered for Class at St. Hedwig: Yes; Class date: _____
 *No; Taken at: _____

**Please provide copy of certification.*

For Parish Staff or Clergy Only

Remarks: _____

Presider: _____

For Parish Staff Only

- | | | |
|--|---|--|
| <input type="checkbox"/> Completed Registration Form | <input type="checkbox"/> Copies of Baptismal Preparation Course (If applicable) | <input type="checkbox"/> Number of Guests: _____ |
| <input type="checkbox"/> Copy of Birth Certificate from County | <input type="checkbox"/> Welcome Letter Envelope | <input type="checkbox"/> Registration fee: _____ |

_____ Date of Baptism

_____ Form Reviewed by (Print)

_____ Staff's Initials _____ Date