

*St. Agatha Catholic Church
Miami, Florida*

APPLICATION FOR BAPTISM

Birth Certificate must accompany this form

Date: _____ Child's Name: _____

Birth Date: _____ City: _____ State/Country: _____

Father's Name: _____ Religion: _____

Mother's Maiden Name: _____ Religion: _____

Address: _____ Zip Code: _____

Registered in the Parish?: YES _____ NO _____ Church Name: _____

Married by a priest?: YES _____ NO _____ Church Name: _____

City: _____ Country: _____

Day Phone: _____ Night Phones: _____

Godfather's Name: _____ Age: _____

Catholic? YES _____ NO _____ First Communion? YES _____ NO _____ Confirmed? YES _____ NO _____

Married? YES _____ NO _____ By a priest? YES _____ NO _____ Church Name: _____

Godmother's Name: _____ Age: _____

Catholic? YES _____ NO _____ First Communion? YES _____ NO _____ Confirmed? YES _____ NO _____

Married? YES _____ NO _____ By a priest? YES _____ NO _____ Church Name: _____

Pre-Baptismal Conference: Date Father's Conference: _____ Date Mother's Conference: _____

Date Godfather's Conference: _____ Date Godmother's Conference: _____

Date of Baptism: _____ Celebrant's Signature: _____

We hereby request the Sacrament of Baptism for our child. We believe that Jesus Christ is our Lord and Savior, we consider ourselves faithful members of his Church. We want to share our Christian faith with the child the Lord has given us. We realize that it is not enough to baptize him/her, but that we must also educate him/her in our religion and give him/her a practical example of Christian life. To assist us in this important task we have selected as sponsors the persons named in the form above. Both are practicing Catholics and have accepted the responsibility that entails that to be sponsors of our child. In the presence of God and before the representative of our parish, we promise to fulfill our obligations as Christian parents. We have read the information and we agree with it.

Father's Signature

Mother's Signature

Date

Parish Representative