REGISTRATION FOR BAPTISM



33333 Mayfair Avenue Abbotsford, B.C. V2S 1P4

www.stannsabbotsford.ca

St. Ann's Roman Catholic Parish

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parishoffice@stannsabbotsford.ca pastor@stannsabbotsford.ca

Please Print					
Name of Child:	Date of Birth:				
Place of Birth: Home Telephone number:					
If this child was adopted, please fill out information on	the back side of this sheet.				
PARENTS:	,				
FATHER'S Full Name:	·				
	Do you practice it regularly?				
MOTHER'S Full <u>Maiden</u> Name:					
	Do you practice it regularly?				
	u married ?:				
requirements as stated in Church Law, namely, 1) the person Baptism, Holy Eucharist, & Confirmation, 3) the person must their pastor sign the form saying that they are practicing sufficient; but there may be two, one male and one female. So	office of godparent (sponsor), each godparent needs to fulfill the basic on must be at least 16 years of age, 2) the person must have received st be a regularly practicing Roman Catholic (the godparent must have Catholics within their parish), 4) one godparent, male or female, is since a godparent needs to represent the Catholic faith community, a tism, but may be present as a Christian witness at the baptism.				
GODFATHER'S Full Name:					
Full Home Address:					
Parish Name & Place:					
GODMOTHER'S Full Name:					
Full Home Address:	·				
Parish Name & Place:					
If there is a proxy for a godparent, then the same cond	· ·				
Name of Proxy: N	Name of Parish:				
Filename: SAP Registration for Bantism	B. Carrier and Car				

Adoption information

Filename: SAP Registration for Baptism

		ase provide the follow			
	as		_ (name)		
			(date)		
			(p1ace)		
	by	·		(names of adopting parents)	
	d a mount	8			
Date & Place of Bo	aptism Class Atter	ıded:			_
Signature by perso	on giving the Bapt	ism Class:			
Scheduled Date fo	or Baptism:				
Priest who celebra	ted Baptism:	Print Name		Signature of Priest	
				*	
Further Notations:	:				
	The state of the s				
	9				