



SAINT ELIZABETH ANN SETON CATHOLIC COMMUNITY

1835 Larkvane Road
 Rowland Heights, CA 91748
 (626) 964 - 3629

CHILD BAPTISM APPLICATION FORM

****PLEASE PRINT ALL INFORMATION CLEARLY****

I have discussed and REVIEWED the necessary requirements with the Parish Staff/Baptism Ministry Team, in order to Baptize my child.			SIGNATURE OF PERSON COMPLETING REGISTRATION FORM		DATE FORM COMPLETED
CHILD'S FIRST NAME	MIDDLE NAME	LAST NAME		CURRENT AGE	GENDER MALE FEMALE
CHILD'S DATE OF BIRTH	PLACE OF BIRTH (CITY)		STATE		
FATHER'S FIRST NAME	FATHER'S LAST NAME		RELIGION	DATE OF BIRTH	
MOTHER'S FIRST NAME	MOTHER'S LAST NAME	MAIDEN NAME (IF MARRIED)	RELIGION	DATE OF BIRTH	
HOME ADDRESS		CITY	STATE	ZIP CODE	
HOME TELEPHONE NUMBER	CELL TELEPHONE NUMBER	WORK TELEPHONE			
EMAIL ADDRESS OF MOTHER			EMAIL ADDRESS OF FATHER		
ARE YOU CIVILLY MARRIED? YES NO	WERE YOU MARRIED IN A CATHOLIC CHURCH? YES NO	PLACE/CHURCH WHERE YOU WERE MARRIED			STATE
<input checked="" type="checkbox"/> BY THIS BOX BEING CHECKED, IT INDICATES THAT THE PARENTS & GODPARENTS HAVE RECEIVED ALL THE INSTRUCTION NECESSARY TO BAPTIZE WITHIN OUR PARISH.			INSTRUCTED BY		DATE
GODFATHER'S FIRST NAME	GODFATHER'S LAST NAME		RELIGION	ROUTINELY ATTENDS CHURCH? YES NO	
GODMOTHER'S FIRST NAME	GODMOTHER'S LAST NAME		RELIGION	ROUTINELY ATTENDS CHURCH? YES NO	
EMAIL ADDRESS OF GODMOTHER			EMAIL ADDRESS OF GODFATHER		
OFFICE USE ONLY					
PERSON ACCEPTING REGISTRATION FORM			DATE	OFFICE NOTES	
INFANT BAPTISM CLASS DATE	PROCESSED BY		BAPTISM DATE SELECTED	DATE INFO ENTERED	
CLASS ATTENDEE'S	FATHER YES NO	MOTHER YES NO	GODFATHER YES NO	GODMOTHER YES NO	
SACRAMENT CERTIFICATES VERIFIED FOR	FATHER YES NO	MOTHER YES NO	GODFATHER YES NO	GODMOTHER YES NO	
BAPTISM RECORDED IN PARISH BOOK BY		BOOK NUMBER	PAGE NUMBER		



St. Elizabeth Ann Seton Church

GROUP BAPTISM ACKNOWLEDGEMENT FORM

PLEASE READ CAREFULLY BEFORE SIGNING THIS FORM!

- Baptism classes will be conducted in the parish church. No food or drink is permitted in the church.
- Classes start promptly at 7:00PM. All members from your family attending the class must be on time. Late arrivals will not receive credit for their late attendance and will need to reschedule for another class either at St. Elizabeth OR another parish.
- The parents and godparents that are listed on the Application Form are required to attend the in-person class and are expected to attend together. In other words, all persons listed must attend the same class in order to be able to move forward with selecting a baptism date with the office staff.
- This is an adult formation class and children are not permitted. Parents need to make prior arrangements for child care. Families that arrive with children will be assisted in registering for the next monthly class. They will not be able to participate in the class being presented that evening.
- This Pre-Baptism class is for the parents and two godparents only. We are not able to accommodate additional sponsors or godparents. Only the persons listed on the application are to attend and only those persons will receive certificates of completion.
- No Baptism date can OR will be guaranteed prior to all persons listed on the Application Form attending a pre-baptism class. Once all the required paperwork is returned to the office staff, you will be able to select a baptism date based upon availability.

By signing this Attendance Requirements Form you are agreeing to the requirements AND acknowledging that you agree to and will comply with the stated requirements.

Signature of Responsible Party

Print Name

Date