## **Holy Trinity Baptism Registration**

Child's Full Name:	Gender: M/F
Child's Date of Birth:	City of Child's Birth:
Father's Full Name:	Father's Date of Birth:
Father's Religion:	Father's Place of Baptism:
Mother's Present Full Name:	
Mother's Maiden Name:	Mother's Date of Birth:
Mother's Religion:	Mother's Place of Baptism:
Church of Marriage (if applicable):	
Home Address:	Postal Code:
Mother's Cell:	Father's Cell:
Email Address:	
one must be male and one must be fema sacraments of initiation (Baptism, Confi cannot be the mother or father. A baptiz	ired, however, 2 godparents are allowed. In the case of 2 godparents, le. The godparent must be a practicing Catholic who has received all 3 rmation, First Eucharist) and is at least 16 years old. The godparent ed person from a non-Catholic Christian church can act as a witness, godparent (Code of Cannon Law, nos 873, 874, 890, 891)
Name of Male Roman Catholic Spo	onsor:
Name of Female Roman Catholic S	Sponsor:
Name of Baptized Christian Witnes	ss (optional):
	nent method: <u>sel.net</u> (put parent or child's name in the comment section)  office during business hours (Mon – Fri, 9am-3pm)
	<u>asktel.net</u> or drop it off at Holy Trinity office. <b>Registration is</b> d payment have been received and acknowledged.
Office Use Only: \$25 registration	fee received
Baptism Prep Date:	Baptism Date/Time: