

2016 BAPTISM INFORMATION FORM

(please select date of baptism)

Baptism of Christ Easter Vigil Pentecost Homecoming All Saints'

**Jan. 10
(10:00am)**

**March 26
(Sat eve)**

**May 15
(10:00am)**

**Sept. 25
(10:00am)**

**Nov. 6
(10:00am)**

INFORMATION ABOUT BAPTISMAL CANDIDATE

Today's Date: <aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa>

Name: _____ M/F _____

Address: _____

Phone (H): _____ Phone (W): _____ Phone (Cell): _____

Date of Birth: _____ Place of Birth: _____

GODPARENTS/SPONSORS
(Full Names)

Baptized?
Yes or No

Belongs to
what church

_____	_____	_____
_____	_____	_____
_____	_____	_____

Why do you want to be baptized or have your child baptized?

Why have you chosen St. Stephen's?

How would like to be involved in the St. Stephen's community?

IF THE BAPTISMAL CANDIDATE IS A CHILD; PLEASE PROVIDE PARENT INFORMATION

Information about Parent:

Name: _____ M/F _____

Address: _____

Phone (H): _____ Phone (W): _____ Phone (Cell): _____

Baptized (denomination) _____ Brought up (denomination) _____

Currently belongs to or attends: Denomination: _____ Parish: _____

Information about Parent:

Name: _____ M/F _____

Address: _____

Phone (H): _____ Phone (W): _____ Phone (Cell): _____

Baptized (denomination) _____ Brought up (denomination) _____

Currently belongs to or attends: Denomination: _____ Parish: _____

NAME OF PERSON COMPLETING THIS FORM _____ **Phone:** _____