

Baptism Registration Form

St. Margaret's Parish

589 Hugel Avenue, Midland ON L4R 1W3
Phone: 705-526-6313 Email: stmargarets@rogers.com

Please complete this form and return it to the parish (PLEASE PRINT)

Parish Information Name of Parish: _____ City: _____ I currently live within the territorial boundaries of the parish. I currently do not live within the territorial boundaries of the parish, but I am formally registered at the parish Child's Information Full Legal Name of Child (At Baptism Interview you will be asked to provide the child's Birth Certificate) Middle Name(s) First Name Last Name Male Female Date of Birth: City of Birth: City of Birth: **Parent's Information** Mother (Full Legal Name & Maiden Name): First Name Middle Name(s) Last Name (Maiden Name) None Religion: Roman Catholic Other: Present Address: _____ Postal Code Email: ____ I am a parent of, or have custody of the child. Father (Full Legal Name): First Name Middle Name(s) Last Name Religion: Roman Catholic Other: _____ None Present Address: Same as mother's Street City Postal Code Email: _____ I am a parent of, or have custody of the child. Place of Marriage:

Godparent's Information

Eligibility of Godparent(s): Canon 873: There is to be only one male godparent or one female godparent or one of each. The following are requirements in order for a Catholic godparent (Canon 274§1): - at least 16 years of age - he/she has been fully initiated into the Catholic Church (received Baptism, Holy Communion, and Confirmation) - in good standing with the Catholic Church: live a life of faith which befits the role to be undertaken; not canonical penalty -not the father or mother of the one to be baptized				
Godparent (Full Legal Name):	First Name	Middle Name(s)		
			Last Name	
Current Parish:		City:		
Present Address:	City	Postal Cod		
Phone:	•			
Fulfills the requirements of Canon 8				
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Godparent (Full Legal Name):	First Name	Middle Name(s)	Last Name	
Current Parish:		City:		
		,		
Present Address:Street		City	Postal Code	
Phone:		- ,	Postal Code	
		_		
Fulfills the requirements of Canon 8	374 §1.			
Christian Witness' Information				
Eligibility of Christian Witness: A Christian Witness for baptism must be a va A Christian Witness may only participate tog	ether with a Cath		ch (Canon 874 §2)	
Christian Witness (Full Legal Name):	First Name	Middle Name(s)	Last Name	
Denomination:				
Present Address:				
Street		City	Postal Code	
Phone:		_ Email:		
Fulfills the requirements of Canon 8	374 §2.			
Declaration				
I, the undersigned, declare that the information on this form (Pages 1 & 2) is true and accurate.				
Name (PLEASE PRINT):				
Signature:		Date:		