



Holy Family Parish  
9622 – 20 Ave SW  
Seattle, WA 98106  
(206) 767 - 6220

**BAPTISMAL REGISTRATION FORM**

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Religion: \_\_\_\_\_ Active?: \_\_\_\_\_

Mother's Full Name (Maiden): \_\_\_\_\_

Religion: \_\_\_\_\_ Active?: \_\_\_\_\_

Parent's Martial Status: \_\_\_\_\_ Married By a Priest / Deacon?: \_\_\_\_\_

Primary Godparent(s): \_\_\_\_\_ Religion: \_\_\_\_\_

\_\_\_\_\_ Religion: \_\_\_\_\_

Other Godparent(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Office Use Only**

Today's Date: \_\_\_\_\_

Family Name: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Celebrant: \_\_\_\_\_

Baptism Class(es) Needed?: \_\_\_\_\_ If So, When?: \_\_\_\_\_

Which Sessions are Needed and / or Completed?

Session 1: \_\_\_\_\_ Completed?: \_\_\_\_\_

Session 2: \_\_\_\_\_ Completed?: \_\_\_\_\_

Pastoral Notes:

Candle Prepared?: \_\_\_\_\_

Baptism Recorded?: \_\_\_\_\_

Registered?: \_\_\_\_\_