

Church of Saint Mary 1347 E. 49th Place Tulsa, OK 74105 phone: 918-749-1423 ~ fax: 918-747-9532	Baptismal Information Requested date for Baptism _____
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TO ARRANGE THE BAPTISM, please complete this form, printing clearly, and bring it to the church office, email to church@churchofsaintmary.com, fax it, or mail to the above address, attention Parish Secretary.

Name of Person being baptized: First: _____ Middle: _____	
Please print clearly Last: _____	
Place of Birth: _____	Date of Birth: _____
Father's Full Name: _____	Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Mother's Full Name with Maiden Name: _____	Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address: street _____ city _____ zip _____	Telephone: home number: _____ cell/business number: _____
Sponsor's Names: Note: <u>at least one sponsor/godparent must be a practicing Catholic, with a letter of good standing from their pastor</u>	
Godfather: _____	Godmother: _____
Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No	Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Parish: _____	Parish: _____
Was your marriage witnessed by a Catholic priest: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please contact a <i>priest</i> before scheduling the baptism	
Are you a registered parishioner of this parish? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please speak with one of the priests	
Do you attend Mass weekly? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you attended Baptismal Preparation Class? <input type="checkbox"/> Yes <input type="checkbox"/> No	
FOR OFFICE USE ONLY	
	Date Performed: _____ By (celebrant): _____
Certificate Mailed: _____	Sacrament Book _____ Computer Updated: _____