SAINT FRANCIS

ASSISI

ROMAN CATHOLIC CHURCH

HENDERSON, NEVADA



Infant Baptism Parental Consent Form

Please PRINT all information! Child's full name: City/state/country of birth: Date of Birth: Father's full name: Religion: Mother's maiden name: ______ Religion: _____ Is either parent a member of an Eastern Catholic Church? If so, which parent and which ritual Church? Parents' status (check one): ☐ Married in Catholic Church ☐ Married civilly or in non-Catholic religion ☐ Unmarried, both parents on birth certificate ☐ Single parent only on birth certificate Catholic godfather: Name of proxy for godfather, if applicable: _____ Catholic godmother: Name of proxy for godmother, if applicable: _____ Name of Christian witness in place of one godparent (optional): Religion of Christian Witness _____ I consent to the baptism of my child in the Catholic Church and realize that, once baptized, the child must be brought up in the practice of the Catholic faith. _ Date _____ _____Date _____ (Mother's signature) (Father's signature)

(City/State/Zip)

(Telephone #)

(Home Address)