

Baptismal Registration for St. Mary's Basilica

Please write clearly and complete the form or baptism could be delayed.

Full Name of Child: _____

Date of Birth: _____

Place of Birth: _____

Complete Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone No: () _____ - _____ **Cell No:** () _____ - _____

E-Mail: _____

Parents' Information:

Father's Name: _____

Religion of Father: _____

Sacraments Received if Catholic: Baptism: _____

Eucharist: _____ **Penance:** _____ **Confirmation:** _____

Mother's Name: (Maiden Name) _____

Religion of Mother: _____

Sacraments Received if Catholic: Baptism: _____

Eucharist: _____ **Penance:** _____ **Confirmation:** _____

Marriage Information: Date: _____

Church Wedding (Catholic): _____

Churches Name & Address: _____

Civil Marriage: _____ **Unmarried:** _____

Registered at St. Mary's Basilica: _____

If Not What Parish – Churches Name & Address: _____

Godmother's Name: _____

Catholic: _____ **Christian Witness:** _____

Parish: _____

Godfather's Name: _____

Catholic: _____ **Christian Witness:** _____

Parish: _____

Proxy for Baptism if Any: _____

Please read and follow the Policies and Procedures as stated on the web sight. Any additional information please write if necessary on back of form.

My contact information listed below:

Phone number for Fr. Edward Sarrazin, O.F.M. 602-354-2062

E-mail: esarrazin@smbphx.org