

# St. Mark Catholic Church

9905 Foothills Canyon Blvd, Highlands Ranch, Co 80129

Phone 720-348-9700 • Fax: 720-344-6847

## Baptismal Information

(Please Print)

Child's full name: \_\_\_\_\_

Child's sex: M\_\_\_ F\_\_\_

Child's date of birth: \_\_\_\_\_

Child's place of birth (city, state): \_\_\_\_\_

Father's full name: \_\_\_\_\_

Religion of father \_\_\_\_\_

Mother's full **maiden** name: \_\_\_\_\_

Religion of mother: \_\_\_\_\_

Address: \_\_\_\_\_

Street City State Zip

Phone: \_\_\_\_\_

Home Mother's cell Father's cell

E-mail(s): \_\_\_\_\_

Name of church where you received the Sacrament of Marriage:

\_\_\_\_\_

Name of sponsor: \_\_\_\_\_

Religion of sponsor: \_\_\_\_\_

Name of sponsor \_\_\_\_\_

Religion of sponsor: \_\_\_\_\_

Will either of the sponsors be presented by a proxy? Yes \_\_\_ No \_\_\_

Proxy name: \_\_\_\_\_ Proxy name: \_\_\_\_\_

Name of witness: \_\_\_\_\_

### **For Office Use Only**

Pre-Baptismal Classes attended: \_\_\_\_\_

Sponsor Certificate Received : \_\_\_\_\_

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

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