

REGISTRATION FOR BAPTISM

Good Shepherd Catholic Parish 1366 3rd Avenue, P.O Box 372 Valemount BC V0E 2Z0

goodshepherd@ntcp.ca pastor@ntcp.ca

North Thompson Catholic Parishes www.ntcp.ca

Please Print	
Name of Child :	Date of Birth:
Place of Birth:	Home Telephone Number:
Home Address:	
If this child was adopted, plea	ase fill out information on the back side of this sheet
Parents Father's Full name:	
Religion:	Do you practice it regularly?
Mother's Full Maiden Name:	
Religion:	Do you practice it regularly?
Name of the Catholic Parish	where married:
GodParents: In order to under Church Law, namely:1) the pers holy Eucharist & Confirmation, 3 have their pastor sign the form a male or female is sufficient. Since	Church, where were you married? take the office of godparent needs to fulfill the basic requirements as stated in on must be at least 16 years of age, 2) the person must have received Baptism, 3) the person must be a regularly practicing Roman Catholic (the god parent must saying that they are practicing Catholics within their parish), 4) one god parent, be a godparent needs to represent the Catholic faith community, a baptized and a Catholic Baptism, but may be present as a Christian witness at the
Godfather's full name:	
Full home address:	
Parish name and place:	
Godmother's full name:	
Full home address:	_
Parish name and place:	

If there is a proxy for a godparent, then the same of the proxy	conditions listed on the first page also app
Name of Proxy:	
Name of Parish:	
Adoption Information	
If this child was legally adopted, please provide the fo	ollowing information:
as	(Name)
on	(Date)
at	(Place)
by	(Names of
adopting parents)	
Date & Place of Baptism Class Attended :	
Signature by person giving the Baptism	Class :
Scheduled Date for Baptism :	
Priest who celebrated Baptism :Print Name	Signature of Priest
Further Notations :	
*	

to