St Luke Catholic Church Baptism Application Form (Please print clearly)

Name of Child		
(First)	(Middle)	(Last)
Date of child's birth		irth
Are you a registered member of St Luke Catholic Church		Member/Envelope #
What Mass time do you normally a	uttend	
Father's Name		Religion
Mother's Full/Maiden Name		Religion
Address:		······································
City & State		Zip
Telephone number(s)		
Email(s)		
age and be confirmed and pra-	cticing Catholics. If single li registered at St Luke, a Cer	e parents; must be at least 16 years of ving a chaste life, if married must be tificate/letter of Competency will be
Confirmation Certificates of Goo	lparents are required (if marr	ied, church marriage certificate required).
Godfather's Name		
Godmother's Name		
	r in their home parish. Baptis	a class, either here at St Luke on the first ms are usually celebrated on the second
Date and Time of Baptism		
Signature of priest/deacon celebrar	nt	Date