SAINT AUGUSTINE CATHOLIC CHURCH

1421 E 2ND STREET

NORTH LITTLE ROCK, ARKANSAS 72114

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BAPTISMAL REGISTRATION FORM



	Office Use C	<u>Only</u>				
Presiding Priest/Deacon: Entered in PDS:		Confirmed date Baptism Parents attended Baptism Class:	(date)			
		_	(uate)			
Recorded in Church Registry:		Godparents attended Baptism Class:	(date			
			,			
	ease print all informati					
All Illiormation is co	mildential and recorde	d in St. Augustine Parish Registry				
Today's Date:	Baptism Date Requested:					
	. 11 . 1					
Child's Full Name as it appears on the offic	al birth certificate					
(First)	(Middle)	(Last)				
Address: (Street Number)						
City:	State:	Zip:				
Phone/Cell:	Other cell:					
Date of Birth:	City of Birth	State				
(A copy of child's birth certificate must accor	-					
Gender of Child: M/F		,				
Father's Full Name: (Last)	(First)	(Middle)				
(As stated on Child's Birth Certificate)	(1 1130)	(imade)				
Religion of Father:	Father Co	nfirmed catholic? Yes () No ()				
Mother's Full Name: Maiden (Last) Name	(F	First)(Middle)				
(As stated on Child's Birth Certificate)						
Religion of Mother:	Mother C	onfirmed Catholic? Yes () No ()				
Email Address: (If desired for baptism notific	cation)					
A		T ()				
Are you (Parents) registered members of St. A If you are <u>not a member</u> of St. Augustine's, a	•					
ij you are <u>noi a memoer</u> of St. Augustine s, a	i written permission is req	juneu jioni your 1 urish.				
Was the child adopted? Yes () No () If	so, legal documentation is	needed.				

Sponsor/Godparent Information

Eligibility of Sponsor(s):

Canon 873: There is to be only one male sponsor or one female sponsor or one of each.

The following are the requirements in order for a Catholic to be a sponsor (Godparent) (canon 874 §1):

- At least 16 years of age
- He/She has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- In good standing with the Church (e.g. has not married outside of the Catholic Church; not cohabitating)
- Not the father or mother of the one to be baptized

Name of Male Godparent:		Membe	r of St. Augustine's: Yes ()	No (
If No, where?		 		
(A letter of good standing is required from	-			
☐ Fulfills the requirements of cano	on 874 §1			
Female Godparent:		Member of St	. Augustine's? Yes () No	()
If No, Where?				
(A letter of good standing is required from				
☐ Fulfills the requirements of canon	874 §1			
	<u>Christian Wi</u>	<u>tnesses</u>		
Eligibility of Christian Witness:				
A Christian Witness for a child's baptism	n must be a validly baptize	ed Christian of a non-	Catholic Church (canon	
874 §2) A Christian Witness may only p				
Christian Witness (Full legal name):				
	First Name	Middle Name(s)	Last Name	
Current Parish:			City:	
Present Address:			<u></u>	
Street	City		State & Postal Code	
Denomination:			_	
Phone:		Email:		
☐ Fulfills the requirements of canon 87-	4 §2			
Declaration				
I, the undersigned, declare that the information	mation on this form (Pages	s 1 & 2) is true and acc	curate.	
Name (PLEASE PRINT):				
Signature:		Date:/	/	
		_		