

*St. Peter's Catholic Church*

P. O. Box 1566  
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(928) 333-4423

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[www.stpeterchurchaz.com](http://www.stpeterchurchaz.com)

BAPTISM REGISTRATION

Name of Child \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Father's Name \_\_\_\_\_

Religion of Father \_\_\_\_\_

Mother's maiden Name \_\_\_\_\_

Religion of Mother \_\_\_\_\_

Were Parents Married by a Catholic Priest? \_\_\_\_\_

Name of Godfather \_\_\_\_\_

Is Godfather Catholic? \_\_\_\_\_

Name of Godmother \_\_\_\_\_

Is Godmother Catholic? \_\_\_\_\_

Is either Godparent requested by Proxy? \_\_\_\_\_

Name of Proxy \_\_\_\_\_

Was the child privately baptized? \_\_\_\_\_

Was the Child adopted \_\_\_\_\_

**MUST: Please attach a copy of the child's Birth Certificate**

Priest or Deacon \_\_\_\_\_