

DATA FOR BAPTISM REGISTRY

St. John the Baptist
106 West Main Street, PO Box 8
Vermillion, MN 55085
651-437-5652

St. Mary
8433 239th Street
Hampton, MN 55031
651-437-5546

St. Mathias
23315 Northfield Blvd.
Hampton, MN 55031
651-437-9030

Full Name of Child: _____

Birth: Date _____ Place _____

Baptism: Date _____ Time: _____ Place: _____

Father's Name: _____ Religion: _____

Mother's Maiden Name: _____ Religion: _____

Residence (Address): _____

Telephone Number: _____ email: _____

Date registered in Parish: _____

Parent's Marriage: Date _____ Place _____ Civil: _____

_____ Religion: _____
Godfather's Name (or Christian Witness (only1)) *

_____ Religion: _____
Godmother's Name (or Christian Witness (only 1)) *

* One Godparent is required. Godparents should be Catholic, baptized and confirmed, 16 years old, and practicing their faith. See eligibility form. Can have 1 Christian Witness who is baptized in another recognized Christian denomination. (Total of 2 people.)
Is Godparent to be represented by Proxy(Name)? _____

Date Baptism class attended? _____

Was the child privately baptized? _____ Was the child adopted? _____

Comments/Remarks: _____

Name of Priest: _____

Completed form must be returned to office prior to date of Baptism.