



St. Anthony Parish

3720 SE 79th Ave. Portland, OR 97206 503 771-6039

Baptism Registration Form

DATE: _____

FATHER: _____ BIRTHDATE: _____

FATHER BAPTIZED (Parish): _____ CITY: _____

FATHER'S RELIGION: _____

HAVE YOU RECEIVED THE SACRAMENT OF CONFIRMATION?: _____

MOTHER: _____ BIRTHDATE: _____

MOTHER BAPTIZED (Parish): _____ CITY: _____

MOTHER'S RELIGION: _____

HAVE YOU RECEIVED THE SACRAMENT OF CONFIRMATION?: _____

ARE YOU MARRIED?: _____ MARRIED IN THE CATHOLIC CHURCH?: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

FATHER'S PHONE: _____ EMAIL: _____

MOTHER'S PHONE: _____ EMAIL: _____

CHILD TO BE BAPTIZED: _____

DATE OF BIRTH: _____

CITY BORN IN: _____ STATE BORN IN: _____

COUNTRY BORN IN: _____

GODPARENTS:

NAME: _____ PARISH: _____

CITY: _____ STATE: _____

NAME: _____ PARISH: _____

CITY: _____ STATE: _____

DATE TO BE BAPTIZED: _____

BAPTIZED BY REV: _____