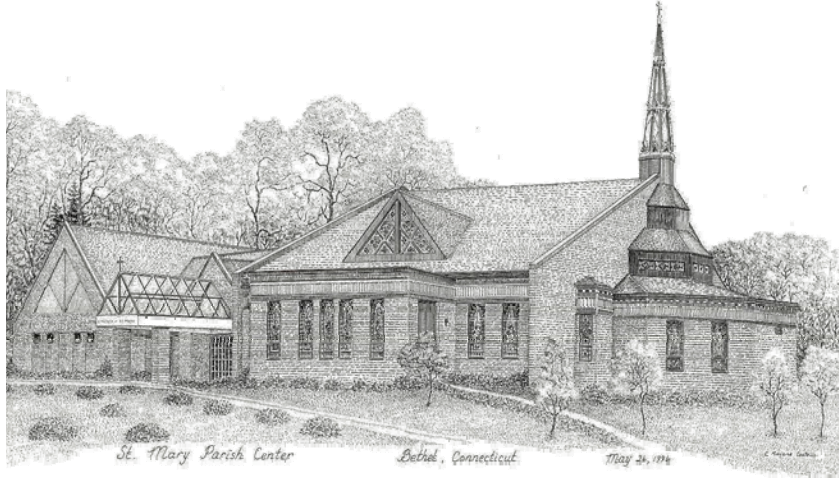


SAINT MARY CHURCH BAPTISM

REGISTRATION Form

26 Dodgingtown Road, Bethel CT 06801
Phone – (203) 744-5777 FAX – (203) 744-3740



Baptisms are celebrated every Sunday at 12:45 P. M. and on the First Sunday of every month during the 11:30am Mass**

REQUIREMENTS FOR BAPTISM AT SAINT MARY PARISH

1. Register for Pre-Baptism class by calling Rectory at 744-5777.
(Class is not required if you have attended in the past)
2. Catholic godparents are required to obtain a sponsor certificate from their Church stating that they are registered and practicing Catholics.
3. Once you have fulfilled the above requirements, call the Rectory (744-5777) and reserve the date for your child's Baptism.
4. Return this form to the Rectory at least one to two weeks prior to the Baptism.

VERY IMPORTANT THAT FORM BE RETURNED TO THE RECTORY
for your child's Baptismal Certificate and for the Church's Baptismal Register.

PRE-BAPTISM CLASS SCHEDULE FOR THE YEAR 2010

JANUARY 12	MAY 11	AUGUST 31	DECEMBER 14
FEBRUARY 9	JUNE 8	SEPTEMBER 21	
MARCH 9	JULY 13	OCTOBER 19	
APRIL 13	AUGUST 10	NOVEMBER 9	

Pre-Baptism classes are held on Tuesday evenings at 7:00 P.M. and should be over by 8:30, but no later than 9:00 P.M.

**** Must know at least 2 weeks in advance for the 11:30am Mass baptisms**

The information requested below is for the Baptismal register of our parish. Please be sure to give **FULL NAMES (NO NICKNAMES or SHORTENED VERSIONS) and PLEASE BE SURE TO PRINT CLEARLY.**

Please Circle:

Name of Child _____ Male Female

Residence _____

Telephone Number _____

Date of Birth _____ **Place of Birth** _____
City or Town & State

Date of Baptism _____

Father's Name _____

Father's Religion _____

Mother's Full Maiden Name _____

Mother's Religion _____

Godfather's Name _____ (Office only: form rec'd ____)

Godfather's Religion _____

Godmother's Name _____ (Office only: form rec'd ____)

Godmother's Religion _____

Name of Priest _____
(if visiting Priest is Baptizing Child)

Is either **Godparent** represented by proxy? **Yes** _____ **No** _____

If **yes**, write name of proxy _____ (Office only: form rec'd ____)

Were Parents Married by Catholic Priest? **Yes** _____ **No** _____

If no, are you interested and would like to speak with a priest? **Yes** ___ **No** ___

Wedding Date _____ **Name & Place of Church** _____

Was Child privately baptized? _____