Sacrament of Baptism		
Email form to frhenrys@gmail.com. Fr. Henry will be in touch with you as soon as possible.		
Full Name of Child		
Is this Your First Child being Baptized (Check box)	YES	NO
Gender of Child (Check box)	MALE	FEMALE
Date of Birth		
Place of Birth		
Full Name of Father		
Full Name of Mother with Maiden Name		
Godfather (Must be Male)*		
Godmother (Must be Female)*		
Full Address of Parents		
Telephone Number		
E-mail Address		
Requested Date of Baptism		
Hour of Baptism	•	nce a month at one of the masses on r the last Sunday mass at 12:30
Clergy (Office use)		
* Please Note: When choosing godparents, one must be a confirmed Catholic and practicing		
his or her faith regularly by going to mass. The second godparent can be a baptized Christian		
from another faith tradition.		