St. John Fisher Catholic Church 7007 SW 46th Ave Portland, Oregon 97219

INFORMATION FOR BAPTISM

(Please TYPE or PRINT LEGIBLY)

Name of Child			
FIRST	MIDDLE	LAST	
Place of Birth	Date of	Date of Birth	
Father's name first			
	middle	last name	
Mother's name	middle	MAIDEN name	
Address			
City		Zip	
Home Phone # ()	Marital Status_	Marital Status	
Father's work phone ()	Mother's work phone ()		
Which parish do you attend?			
Religion of father	Religion of mother		
(Both Godparents must be committed Chr	ristians, at least one of them m	ust be a Catholic)	
Name of Godfather	Re	eligion	
Name of Godmother	Re	Religion	
[Name of proxy (Only if one of the God	Redparents cannot be present)	eligion]	
********	For Office Use Only **	********	
Date of Baptism:	Recorded in Sacra	Recorded in Sacrament Book	
Baptized by:			
Certificate			