Church of the Blessed Sacrament

607 CENTRAL AVENUE, ALBANY, NEW YORK 12206-1918

Baptism Information Form for Children

Child's Full Name			□ M □ F
Address			
Phone Number		E-mail	
Date of Birth		Place of Birth	
Requested Date & Time of Baptism			
Preferred Celebrant Fr. Q	uinn / Fr. Yusko / Den.	Gerry / No Preference	
Was the child privately Baptized?			
Father		D. 1: .: (0 Cl1: ::)	
Mother (Maiden)		Religion (& Church sui iuris)	
Is Blessed Sacrament your regular par Were parents married by a Catholic m If no, are you interested in being marr	ninister? \square Yes \square N ried in the Church/havin	o Where? ng your civil marriage convali	idated? □ Yes □ No
	Godfather	Godmotl	
Name			
Which parish does s/he belong to?			
Is s/he at least 16 years of age?	□ Yes □ N	o □ Yes □	l No
Is s/he a Catholic?	\square Yes \square N	Yes □ No □ Yes □ No	
Has s/he been Baptized?	\square Yes \square N	\square Yes \square No \square Yes \square No	
Has s/he received the Catholic Sacram	nent of Confirmation (o	r Eastern Rite Chrismation)?	
	\square Yes \square N		l No
Has s/he received the Catholic Sacram	· ·		
- "	□ Yes □ N		
Is s/he a practicing Catholic who faith	•	•	
However, one Godparent may	be replaced with some	alifies one from being a Catho	olic Godparent.
Is s/he married?	□ Yes □ N	· · · · · · · · · · · · · · · · · · ·	l No
If so, did the marriage take place with			
	□ Yes □ N	[o □ Yes □	1 No
Parish Use Only			
Certificates of Eligibility Received			
Date & Time	Celebrant		