

St. Patrick's Parish

St. Patrick's Catholic Church
724 Camp Street
New Orleans, LA 70130

St. John the Baptist Catholic Church
1139 Orthea Castle Haley Blvd.
New Orleans, LA 70113

Baptismal Application

Full Name of Child: _____ Male/Female

Date of Birth: _____ Place of Birth: _____

Family Address: _____

Family Phone Numbers: (H): _____ (Mobile): _____

Father's Full Name: _____

Father's Religion: _____

Mother's Full Name(Maiden): _____

Mother's Religion: _____

Are you registered parishioners of St. Patrick's Parish? Yes No

If not, at which parish are you registered? _____

If you are not a St. Patrick's Parish parishioner, have you obtained a letter of permission from your parish pastor to have the baptism take place in St. Patrick's Parish? Yes No

Are you married? Yes No

Were you married by a Catholic priest or deacon? Yes No

Date of Marriage: _____ Location of Marriage: _____

Has the child ever been baptized privately due to illness, danger of death, or any other reason? Yes No

Please answer Yes or No to the following: FATHER MOTHER

Have you received the following sacraments?

Baptism	Yes	No	Yes	No
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Holy Eucharist	Yes	No	Yes	No
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Confirmation	Yes	No	Yes	No
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Do you attend Sunday Mass regularly?	Yes	No	Yes	No
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Do you frequent the sacrament of Reconciliation?	Yes	No	Yes	No
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Have you previously attended a baptismal seminar?	Yes	No
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If yes, Date: _____ Location: _____

Number of other children: _____ Age: _____ Age: _____ Age: _____ Age: _____ Age: _____
Source of religious Education: Catholic School CCD Other: _____

Godparents

Godfather/Witness's Name: _____

Date of Baptism: _____ Location of Baptism: _____

Is he a practicing Catholic? Yes No Has he been Confirmed? Yes No Over 16 years of age? Yes No

If not Catholic, what religion? _____

Godmother/Witness's Name: _____

Date of Baptism: _____ Location of Baptism: _____

Is she a practicing Catholic? Yes No Has he been Confirmed? Yes No Over 16 years of age? Yes No

If not Catholic, what religion? _____

Will either godparent/witness be represented by proxy? Yes No

Name of proxy: _____

PLEASE NOTE: *Cannon Law of the Catholic Church states: "The Godparent must be a practicing Catholic who is at least 16 years of age and has already received the Sacrament of Confirmation. A baptized and believing Christian from a separated church may be listed as a Christian witness." You must have ONE Catholic Godparent.*

It is customary, not obligatory, to donate to the church upon conclusion of the baptism. Suggested donation is between \$200-\$300.

Comments:

FOR PARISH USE ONLY:

Church: St. Patrick's Church St. John the Baptist Church

Priest/Deacon Scheduled for Baptism: _____

Date and Time of Baptism: _____

Testimonials: Father _____ Mother _____ Godfather _____ Godmother _____

Seminar: Father _____ Mother _____ Godfather _____ Godmother _____

Letter of Permission if out of Parish: _____

Certificate Printed: Yes No Date Recorded in Baptism Register: _____

ARCHDIOCESE OF NEW ORLEANS

Parental Testimonial for the Sacrament of Baptism

Date: _____

Name of Child to be Baptized: _____

Proposed Date of Baptism _____

Statement of Catholic Parent(s)

“It is my sincere hope and intention to raise my child in the Catholic faith and to do all in my power to assure through my own efforts that my child practices and grows in the Catholic faith.”

By signing below, the Catholic parent(s) solemnly swear that the statement above is a true and correct indication of their intentions.

(Must be signed by at least one Catholic parent.)

Father's Signature: _____

Father's Name Printed: _____

Mother's Signature: _____

Mother's Name Printed: _____

Signature of Pastor or Delegate (In Parish where Baptism is to be Celebrated)

ARCHDIOCESE OF NEW ORLEANS

Godparent Testimonial for the Sacrament of Baptism

Date: _____

Name of Child to be Baptized: _____

Proposed Date of Baptism _____

Criteria to Serve as Godparent for Baptism

1. The Godparent must be a Catholic in good standing with the Church who has been Confirmed and regularly practices his/her Catholic faith;
2. The Godparent must be at least sixteen years of age;
3. If married, the Godparent must be in a marriage recognized as valid by the Catholic Church. Person may not be cohabiting, or living together without marriage.
4. If not previously attended, the Godparent will attend a Baptismal Seminar in preparation for this Baptism.

Statement of Godparent

“I meet the above stated criteria to serve as a Godparent, and I will do all in my power to assist the parents of this child to raise their child in the Catholic faith.”

By signing below, the proposed Godparent solemnly swears that he or she has read the above criteria, and that the statement above is a true and correct indication of his/her intentions.

Godparent's Signature: _____

Godparent's Name Printed: _____

Signature of Pastor or Delegate (In Parish where Baptism is to be Celebrated)