1701 Bloor Street West, Toronto, ON, M6P 1B1

Child Baptism Application (for children up to age 6) Please print in BLOCK LETTERS

Child's Full Name	First Name	Middle Nam	e	Last Name			M/F
Birth Date	(MM/DD/YYYY)	City / Place of Birth					
Father's Name	First Name	Middle Name		Family Name		Faith Tradition	
Mother's Name	First Name	Middle Na	me	<mark>Maiden</mark> Name		Faith Tradition	
Address			City		Postal	Code	
Home Phone No.		Work Phone No.					
Cell Phone No.		E-mail					
Registered Parishioner at St. Joan of Arc ☐ Yes ☐ No ☐ New			Interviewed	□ via phone □ in person	Interview Date		
Married at							
Address / Location							
Two godparents only can be named on the baptismal certificate. One must be a practicing Catholic, has been fully initiated into the Catholic Church (i.e. received the sacraments of Baptism, Confirmation and Eucharist/Communion), and 16 years of age or older. Only one godparent is required by the Church.							
Godparent's Name	First Name Middle		Name	Family Name		Faith Tra	dition
					Romai Cathol		c
□ Not Married □ Married in the Catholic Church							
Godparent's / First Name Midd Christian Witness's Name			dle Name	Family Name Fa		Faith Tra	dition
□ Not Married □ Married in the Catholic Church □ Married in other faith tradition / civic							
Baptismal Class Date ☐ Present ☐ Absent Attended by			Instructed by				
Baptism Date			Baptized by				
Notes:							

☐ Entered: Baptismal Register v.08.17.2015