



# BAPTISM APPLICATION

3824 Mitchell Rd., Ceres, CA 95307  
209-537-0516 ▪ stjudeceres.org

**CHILD'S LAST NAME:** \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Father to be present** ( ) YES ( ) NO                      **Mother to be present** ( ) YES ( ) NO

**If NO, please explain:** \_\_\_\_\_

**If one of the parents will NOT be present, a letter with an original signature is required for the one being absent, giving his/her permission to baptize the child. (see example)**

SPONSOR'S FULL NAME: \_\_\_\_\_ Parish: \_\_\_\_\_

Single: ( ) YES ( ) NO    Married in Catholic Church: ( ) YES ( ) NO    18 yrs or older: ( ) YES ( ) NO

SPONSOR'S FULL NAME: \_\_\_\_\_ Parish: \_\_\_\_\_

Single: ( ) YES ( ) NO    Married in Catholic Church: ( ) YES ( ) NO    18 yrs or older: ( ) YES ( ) NO

Notes: \_\_\_\_\_

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

**Office Use Only:**

- Sponsor/Padrino
- ( ) Baptism
  - ( ) Communion
  - ( ) Confirmation
  - ( ) Religious Matrimony
  - ( ) Pre-Baptismal Class
  - ( ) Permission Letter

- Sponsor/Madrina:
- ( ) Baptism
  - ( ) Communion
  - ( ) Confirmation
  - ( ) Religious Matrimony
  - ( ) Pre-Baptismal Class
  - ( ) Permission Letter

Date of Baptism: \_\_\_\_\_

Father: ( ) Pre-Baptismal Class

Mother: ( ) Pre-Baptismal Class

Receipt # & date paid: \_\_\_\_\_

Staff Initials: \_\_\_\_\_