

Baptism Checklist

Parent(s) Responsibilities: Required Forms

_____ Registered parishioners of Saint Michael parish attending Sunday Mass weekly

_____ New parishioners need to first meet with the Steward for Sacramental Preparation

_____ Baptism Information Form: Due 1 month prior to baptism

_____ Godparent Eligibility Form: Due 2 weeks prior to baptism date

- If the Godparent(s) are a parishioner of Saint Michael Parish turn in the following certificates with the Sponsor form:
 1. Baptism
 2. Confirmation
 3. Marriage in the Catholic Church
- Canon Law requires the following for all Godparent(s)
 1. Baptized & Confirmed Roman Catholic
 2. At least 16 years of age
 3. Single or Married in the Roman Catholic Church

_____ Birth Certificate Due 2 weeks before Baptism

_____ Completion of Baptism Preparation Class certificate due 2 weeks before Baptism

Saint Michael Parish Responsibilities:

_____ Schedule a meeting with new families within a week of request.

_____ Contact parent to confirm date and location of baptism: 3 days after receiving Baptism Information Form

_____ Reminder call about any missing forms: 3 weeks before baptism

_____ Contact parents to cancel baptism if forms are missing: 2 weeks prior to the baptism

_____ Baptism Facilitator will contact parents to answer any questions: 1 week before baptism

Baptism Information Form

Baptism Cannot Be Scheduled Until This Form Is Received

Date _____

Child's Name _____
First Middle Last/Legal

Birth date _____ Birthplace _____
City State

Godparent(s)* Information

***Godparent(s) must be active, fully initiated (rec'd Baptism, Confirmation & Eucharist) Roman Catholics. In addition, your child may have a Christian witness of another denomination. Only one Godparent is required, but you may have one of each gender. The Catholic Godparent can be an unmarried person but if they are married it is required that they are married in the Catholic Church. The Sponsor eligibility form must be received two weeks prior to the baptism.**

Name _____ Roman Catholic? ___ Yes ___ No

If yes, Name, City and State of Parish _____

Name _____ Roman Catholic? ___ Yes ___ No

If yes, Name, City and State of Parish _____

Name of Proxy (if needed) _____

Mother _____
First Middle Birth Last Current Last

Religion/Denomination _____ Sacraments Rec'd: Baptism Confirmation Eucharist Reconciliation Matrimony
Circle sacraments parent has received

Father _____
First Middle Birth Last Current Last

Religion/Denomination _____ Sacraments Rec'd: Baptism Confirmation Eucharist Reconciliation Matrimony
Circle sacraments parent has received

Address of Custodial Parent(s) _____
Street Address City State Zip

_____ Email Address Mother's Daytime Phone Father's Daytime Phone
Baptism Classes Taken _____ at _____
(Date) (Church)

Are you registered in the parish? ___ Yes ___ No ___ Unsure _____

Do you attend Mass at S Michael ___ Yes ___ No If not, where? _____

Will child be baptized at St. Michael? ___ Yes ___ No Do you request full immersion?* ___ Yes ___ No

***Please Note: Children 3 or more years of age will be immersed**

Are the parents married? ___ Yes ___ No If yes, was it in the Roman Catholic Church? ___ Yes ___ No

Are you interested in speaking to someone about having your marriage celebrated in the Church? ___ Yes ___ No

Please Complete the Reverse Side

Demographic Information: Please check one:

African American ___ Hispanic/Latino ___
Asian (Japanese,Chinese) ___ Filipino ___ Korean ___ East Indian ___
Southeast Asian (Vietnamese, Hmong, Lao, Thai, etc.) ___ Pacific Islander(Samoan, Guamanian, etc) ___
American Indian (Native American/Alaska Native) ___ Caucasian/American. ___
Both parents of unknown race/ethnicity _____

*** Please remember, a copy of the birth certificate and godparent eligibility form must be submitted two weeks in advance, or the baptism will be rescheduled***

Office Use Only: Baptism Date _____ Time _____	
Presider _____	
Full Immersion Completed?	Yes _____ No _____
Facilitator (Name) _____	
Candle Needed? _____	White Garment? _____
Godparent(s) Name(s): _____	
Proxy Name: _____	
Date Recorded: Register _____	PDS _____ Date Certificate Mailed _____
_____	_____
(City)	(State)



St. Michael Parish
Faith Formation Office
P.O. Box 766
Olympia, WA 98507-0766

Godparent/Sponsor Eligibility Form

To be completed by the Parish of the Godparent(s)/Sponsor

_____ is a member of this Parish and according to our records has been fully initiated (Baptism, Confirmation and Eucharist) in the Roman Catholic Church. If the sponsor is married, he/she must be married in the Catholic Church. S/he is eligible to act as a Godparent/Sponsor in the Sacrament of Baptism/Confirmation.

(Name of Child/Candidate)

(Date of Baptism/Confirmation)

Please
place
seal here

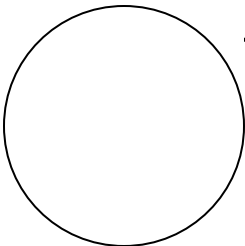
Parish

City

State

PRINT PASTOR'S NAME (or Designated Representative)

Signature



*All completed forms must be returned to St. Michael Parish **two** weeks prior to the Baptism*