Registration Form

Our Lady of Mercy Parish

Name of Child:	First:	Middle:		
	Last:	Suffix:		
Male:	Female:			
Residence:				
	:: Email:			
Date of Birth:	City/State of Birth	ı:		
Date of Baptism Pr	ep Class: Anticipate	ed Date of Bap	tism:	
	FAMILY INFORMA	TION		
Full Name of Fath	ner: First:	Middle:		
	Last:	Suffix:		
Religion of the Fath	ner:			
Full Name of Mother: First:		Middle:		
	(Maiden):	Suffix:		
Religion of the Mot	her:			
Were the Parents M	farried by a Catholic Priest/Deacon?	Yes	No	
Date of Marriage: _	Name of Priest/D	eacon:		
Location of Marriag	ge (Church, City, State):			
	GODPARENT INFOR	MATION		
-	Godparents must be a baptized, confirmed an the Catholic Church]. See our website for mo			
Full Name of Godfather: First:		Middle:		
Last:		Suffix:		
Religion of Godfath	ner:			
Was the Godfather confirmed (if Catholic)?		Yes	No	
If married, the Godfather is married in the Catholic Church?		Yes	No	Not Married
Full Name of Godmother: First:		Middle:		
Last:		Suffix:		
Religion of Godmo	ther:			
Was the Godmother confirmed (if Catholic)?		Yes	No	
If married, the Godmother is married in the Catholic Church?		Yes	No	Not Married
Is either Godparent represented by a proxy:		Yes	No	
Name(s) of Proxy: _				
Was the child privately baptized?		Yes	No	
Was the child adopted?		Yes	No	
Notes:				