## ST. ELIZABETH/ST. ANDREW PARISH CHURCHES PRE-BAPTISMAL QUESTIONNAIRE

Child's Full Name	
Date of Birth	City and State of Birth
Father's Name	Religion
Mother's Name	Religion
Mother's Maiden Name	
Godfather's Name	Religion
Godmother's Name	Religion
Godfather or Godmother Christian Witness? Y or (circle	
	onfirmed, and Practicing Catholics. If there are two godparents or one other male. Non-Catholics can only serve as a Christian Witness.
Date of Baptism	Number Attending (pews reserved)
Marital Status If single, a	are there plans for marriage? Yes or No (circle one)
Are you practicing Catholics? Yes or No	
We/I attend Church: Always Often Seldom (circle one)	Frequently
Home Phone Number	Work Phone Number
Address	
City, State, Zip	<u>→</u> 9
Office Use Only	
Baptized on/ Baptized	by (return to office)
Date recorded in church record book	