Saint Olaf Catholic Church

Baptismal Registration Form

Date of Baptism: _____ Today's Date: _____

Child's Full Name: _____
First Middle Last

Date of Birth: _____

Place of Birth: _____
City State

Home Address: _____
Street City State Zip Code

Home Phone: _____ Work: _____

Father Cell: _____ Mother Cell: _____

Father's Full Name: _____ Religion: _____

Father's Place of Birth: _____
City State

Mother's MAIDEN Name: _____ Religion: _____

Mother's Place of Birth: _____
City State

Are Parents married in the Catholic Church? _____

If YES, Name of Church: _____ Date: _____

Godfather's Name: _____ Religion: _____

Godmother's Name: _____ Religion: _____

Administering Priest/Deacon: _____

Can we announce the Baptism in the bulletin? _____

Baptismal preparation by: _____ Date: _____

Please return the Baptism Registration Form to the Saint Olaf Parish office: 276 East 1700 South, Bountiful, Utah 84010
For more information, please visit: www.stolafut.org/baptism.html