

# Our Lady of The Valley Parish

Holy Rosary Church, 10 Fr. Salemi Drive, Ansonia, CT 06401  
Church of the Assumption, 61 N Cliff Street, Ansonia, CT 06401

## BAPTISM INFORMATION FORM

Full Name of Child Candidate: \_\_\_\_\_

Date Requested for Baptism: \_\_\_\_\_ Church:  Assumption  Holy Rosary

Today's Date: \_\_\_\_\_ Date of Baptism Class: \_\_\_\_\_  
Sponsorship forms received: Yes / No

Sex: Boy / Girl Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ (Maiden) \_\_\_\_\_ Religion: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Other Children (Names & Ages):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Godfather's Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Godfather's Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Godmother's Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Godmother's Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

## ***CHECKLIST FOR OFFICE USE***

### **Before Baptism:**

Schedule Date of Pre-Baptism Meeting (if needed) \_\_\_\_\_

If Already Completed \_\_\_\_\_

Reminder Call Before Class/Baptism \_\_\_\_\_

Sponsorship Certificates Received:

Godfather: \_\_\_\_\_ Godmother: \_\_\_\_\_

Family Updated in Parish Census \_\_\_\_\_

### **For The Baptism:**

Baptism Certificate Prepared \_\_\_\_\_

Letter from the Pastor \_\_\_\_\_

Added to Baptism Index & Sacramental Register \_\_\_\_\_

### **Other Notes:**

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