

Immaculate



of Mary Church

180 Loudon Road; Concord, NH 03301

Telephone Number: (603) 224-4393

Fax Number: (603) 224-6229

BAPTISMAL REGISTRATION FORM

Baptism Preparation Date: ___/___/201__

Baptism Date: ___/___/201__

Time: _____

Baby's: Name _____

Date of Birth ___/___/___ Place of Birth _____

Father's: Name _____

Religion _____

Mother's: Name _____

Maiden Name _____

Religion _____

Godfather's: Name _____

Religion _____ Relationship to Godmother Wife None

Godmother's: Name _____

Religion _____

Proxy _____

Parish: Registered? ___ Yes ID # _____ ___ No Date Registered ___/___/___

Family: Address _____
City _____ State ___ Zip _____ - _____

Telephone Home _____ Cell _____
Email _____

Sacristan Notified? Sunday (Ed Mullen)

Baptizing Priest Fr. Raymond Ball
 Deacon John Morrow
 Other _____

Posted:
Pastor's Desk Calendar _____
Booklet Sent _____
Certificates _____
LOGOS _____
Bulletin _____
Register _____

Completed By _____ Date ___/___/201__