

**Most Holy Trinity Roman Catholic Church**  
235 N. Convent Street, Trinidad, CO 81082  
719-846-3369 (office) 719-846-4856 (fax)  
www.trinidadcatholic.org

**BAPTISM REGISTRATION FORM**

Please Print Clearly

*All information is confidential and recorded in Most Holy Trinity Parish Registry*

**Child's Full Name:** \_\_\_\_\_  
First Middle Last

**Date of Birth:** \_\_\_\_\_  
Month Day Year

**Place of Birth:** \_\_\_\_\_  
City State

**Home Address:** \_\_\_\_\_  
Street City/State Zip Code

**Phone Number:** \_\_\_\_\_

**\*\*\*A copy of the child's birth certificate must accompany Registration Form\*\*\***

Parent Information

- The Pastoral Center Office must receive the Baptism Registration Form, a copy of the Birth Certificate, and \$25 fee no later than the Thursday before the scheduled Saturday class.
- Parents are asked to plan ahead – no parties should be planned and no invitations should be sent out before attending the Baptism class and the Baptism is scheduled.
- It is best to attend before the baby is born.
- The parents of the child/children seeking Baptism are encouraged to be registered in the Parish.
- Think ahead regarding your choice of Godparents and seriously consider the qualifications of those chosen. There is one Godfather and one Godmother – no multiples.

**Father's Full Name:** \_\_\_\_\_  
First Middle Last

**Religion of Father:** \_\_\_\_\_

**Mother's Full Name:** \_\_\_\_\_  
First Middle Maiden Last

**Religion of Mother:** \_\_\_\_\_

**Marital Status of Parents:**                     MARRIED                     UNMARRIED

**Child Lives With:**  Both Parents     Mother     Father     Other: \_\_\_\_\_

**Was the child adopted?** \_\_\_\_\_

**Was the child privately baptized?** \_\_\_\_\_

**Godparent Information**

*The Roman Catholic Church requires the following of Godparents (Canon 874.1):*

- The Godparents are to be appointed by the parents or guardians.
- Must be at least 16 years old.
- They must be baptized Roman Catholics who have received the Holy Eucharist, and the Sacrament of Confirmation.
- They should be leading a life in harmony with the faith; i.e., practicing Catholics (attending Mass), if married, in a valid Catholic Marriage, etc.
- They may not be the father or mother of the one being baptized.
- You may choose one or two Godparents. If you choose two, one must be male and the other female.
- Parents and Godparents are required to take the Baptism Preparation Class. If Godparents are not registered with Most Holy Trinity, they must provide a letter from their Pastor indicating good standing with the Church and proper preparation.

Name of Godfather: \_\_\_\_\_ Catholic? \_\_\_\_\_

*If married, is Godfather in a valid Catholic Marriage; i.e., married in the Roman Catholic Church?* [ ] YES [ ] NO [ ] N/A

Name of Godmother: \_\_\_\_\_ Catholic? \_\_\_\_\_

*If married, is Godmother in a valid Catholic Marriage; i.e., married in the Roman Catholic Church?* [ ] YES [ ] NO [ ] N/A

Will either Godparent be represented by a Proxy(ies)? [ ] YES [ ] NO

Name of Proxy(ies): \_\_\_\_\_

Requested Date of Baptism: \_\_\_\_\_

*(We cannot guarantee the Baptism will take place on the date requested)*

By signing below, I certify that all information provided on this form is true and correct, and I hereby give permission for the baptism of the above-named child in the Roman Catholic Church. *Legal documentation verifying guardianship must be submitted, if parents are not the legal guardians.*

\_\_\_\_\_  
Signature of Mother/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Father/Guardian

\_\_\_\_\_  
Date

**PLEASE RETURN FORM TO PASTORAL CENTER OFFICE DURING REGULAR BUSINESS HOURS.**  
**MONDAY-THURSDAY 8AM-4:30PM AND FRIDAY 8AM-12:30PM.**

**Office Use Only**

Date of Baptism Class: \_\_\_\_\_

Birth Certificate Received: \_\_\_\_\_

\$25 Fee Received: \_\_\_\_\_

Godparent Info Received: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Presiding Priest/Deacon: \_\_\_\_\_

Recorded in Church Registry: \_\_\_\_\_