



ST. ANNE CATHOLIC CHURCH
1131 N. E. 10TH STREET
GRANTS PASS, OR 97526
541.479.4848 – 541.476.2194 (FAX)

www.stannegp.com

APPLICATION FOR BAPTISM APLICACION PARA BAUTISMO

Name of Child: _____

Nombre del Niño **First/Primer Nombre** **Middle/Segundo Nombre** **Last/Apellido(s)**

Mailing Address/

Direccion: _____

City: _____ **State:** _____ **Zip Code:** _____
Ciudad Estado Codigo Postal

Phone Number : _____
Numero de telefono

Email: _____
Correo electronico

Date of Birth: _____ **Place of Birth:** _____
Fecha de Nacimiento Lugar de Nacimiento

Date of Planned Baptism: _____ **Mass Time:** _____
Fecha planificada del bautismo Hora de la Misa

*****Please attach a copy of birth certificate to this form/
Favor adjunte una copia de la acta de nacimiento*****

Father's Name: _____ **Religion:** _____
Nombre del Padre

Mother's Name: _____ **Maiden Name:** _____ **Religion:** _____
Nombre de la Madre Apellido de soltera

Godfather's Name: _____
Nombre del Padrino

Godmother's Name: _____
Nombre de la Madrina

**Please Return All Completed Forms to the Faith Formation Office in the Parish Center, Pastoral Associate
Por favor Entregue las Formas Terminadas a la Oficina de Formacion Religiosa en el Centro Parroquial,**

Date Received: _____ Date Certificate Made: _____
Date Recorded in Parish Register: _____



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GODPARENT FORM FORMULARIO PARA PADRINOS:

I, _____, phone number, _____,
 (print your name)

have been asked to be a Godparent for _____
 (please print child's name)

BAPTISM (OF GODPARENT)/Bautismo del Padrino o Madrina

DATE/Fecha	CHURCH NAME/Nombre de la Iglesia	CITY/Cuidad	STATE/Estado
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CONFIRMATION (OF GODPARENT)/Confirmacion del Padrino o Madrina

DATE/Fecha	CHURCH NAME/Nombre de la Iglesia	CITY/Cuidad	STATE/Estado
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Please circle either YES or NO for each question:

Are you Catholic? YES NO

Are you at least 16 years old? YES NO

Have you received Confirmation and Holy Eucharist in the Catholic Church? YES NO

Do you attend Mass regularly on Saturdays/Sundays and receive the sacraments of the church regularly? YES NO

Answer the following only if married: YES NO

Answer the following only if unmarried:

Are you living (cohabitating) with another person in a romantic relationship or as a couple? YES NO

I affirm that I meet the qualifications, and accept the responsibilities, of being a godparent. I am an active and participating Catholic and promise to the best of my ability to serve as an example in encouraging this child to participate in the sacramental life of the church.

Godparent's signature _____ Date _____

_____ has read and assures us that he/she meets the above requirements.

_____ He/She is a registered and active member of our parish.

_____ He/She has just recently registered and intends to be active in this parish.

_____ He/She assures that the above requirements are met, but is not known to us, and as such, we are unable to provide a statement that he/she is a Catholic in good standing. He/She promises to use the invitation to be a Godparent/Sponsor as an opportunity to rekindle his/her faith.

Name of Parish _____

Phone # _____

Pastor's signature (Godparent's pastor) _____

