

**SAINT MICHAEL THE ARCHANGEL ROMAN CATHOLIC CHURCH
SAINT TIMOTHY CHAPEL
469 North Street
Greenwich, CT 06830
Telephone – 203 869-5421 - Fax – 203 869-0169**

Information for Baptism Register

Name of Child _____

Residence _____

Telephone Number _____

Date of Birth _____

Place of Birth _____

Date of Baptism _____

Father's Name _____

Religion of Father _____

Mother's Maiden Name – First _____ Maiden _____

Religion of Mother _____

Were Parents Married by a Catholic Priest? _____

Godfather _____

Is Godfather a Catholic? _____

Godmother _____

Is Godmother a Catholic? _____

Is either Godparent represented by Proxy? _____

Name of Proxy _____

Was the child privately baptized? _____

Was the child adopted? _____

Name of Priest _____

PLEASE RETURN TO OFFICE PRIOR TO BAPTISM CEREMONY

