



FORT BELVOIR CATHOLIC COMMUNITY BAPTISMAL CERTIFICATE INFORMATION FORM

EXPECTED DATE OF BAPTISM: _____ (Baptisms are scheduled the fourth Sunday of each month after the 9:15 Mass in the Woodlawn Chapel- except Christmas & Easter)

Please check ONE of the following:

- _____ My/Our child will be baptized at Ft. Belvoir (Fill in Part I only)
- _____ My/Our child will be baptized at another parish (Fill in Part I and Part II)
- _____ I/We are acting as godparents for a child and need a parish letter of good standing (Fill in baptized name and Part II only)

PLEASE PRINT ALL INFORMATION:

PART I:

Name of person to be baptized: _____

FIRST MIDDLE LAST

Date of birth: _____ **Age (put age on appropriate line below):**

Newborn (to age 1) _____ Infant (1-6 yrs) _____ Adult (7 years or older) _____

Place of Birth (city/state): _____

Residence: _____

STREET ADDRESS CITY/STATE/ZIP

Home Phone: _____ **Cell Phone:** _____

Email Address: _____

Father's Full Name: _____

Father's Religion: _____

Mother's Full Name (Maiden Name): _____

Mother's Religion: _____

Branch of Service: _____ (Check one): _____ Active Duty _____ Retired

Are the child's parents in a valid Marriage? Y _____ N _____

Godfather's Name: _____ (Catholic)

Godmother's Name: _____ (Catholic)

Will either Godparent be represented by proxy? Y _____ N _____

If so, name(s) of proxy: _____

Notes:

- Godparents must meet Canon Law requirements (must be 16 and confirmed; IF married, must be a valid Catholic marriage)
- Non-registered members of Ft. Belvoir wishing to be Godparents must provide a letter of good standing from their local pastor

PART II:

Your Name: _____

Name of parish where Baptism will take place: _____

Complete address of parish: _____

Parish phone number: _____ **Parish fax number:** _____