

St. Margaret Mary Catholic Church 1101 W. New Hope Drive Cedar Park, TX 78613

Request for Baptism

Phone: 512-259-3126 Fax: 512-259-9658 Email: stmmc@stmargaretmary.com

Infant to be Baptized						
First Name			Dat	te of Birth		
Last Name				Place of Birth		
Parent Information			Sponsor Information			
Father's Last			Sponsor 1	Last		
Father's First			Sponsor's F	irst		
Date of Class			Date of Cla	iss		
Mother's Maiden			Sponsor 2	Last		
Mother's First				sor First		
Date of Class			Date of Cla	SS		
Address			Witness/Pro	ху		
City State			Church	Records	For Office Use Only	
Zip Code				1	,	
Home No:	Cell		Baptism	Date Time		
			Staff Date			
Notes/Comments:				·	Confirmation Provided	
Documents Required Prior to Scheduling Baptism & Stipend: Officiant						
Copy of State issued Birth Certificate		Cash	Date of Baptism		ism	
☐ Verification of class taken at another Parish		Check		Staff		
☐ Permission Letter from Pastor outside SMM☐ Sponsor Covenant Forms		Credit Card	Register Page			
		Staff Date		-	Rev. 8.14.15	