



Catholic Communities of Brawley & Westmorland

Sacred Heart Church, St. Margaret Mary Parish, St. Joseph Church

402 S. Imperial Ave, Brawley, CA 92227 (760) 679-3505

brawleycatholic@gmail.com

Baptism Registration Form

Name of Child: _____

Date of Birth: _____ Place of Birth: _____ State: _____

Father's Full name: _____

Address: _____

Phone: _____ Religion: _____

Mother's Full Maiden Name: _____

Address: _____

Phone: _____ Religion: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed

If married: ☐ Civil ☐ Catholic Priest/Deacon

Does the family attend Sunday Mass here regularly? ☐ Yes ☐ No

Are you registered in our parishes? ☐ Yes ☐ No

If yes, please provide envelope #: _____

If you are a member of another Parish, please provide name of Parish and Pastor:

Please note the following requirements are for Godparents/Sponsors:

- ☐ Baptized in Catholic Church
- ☐ Attend Sunday Mass regularly
- ☐ If married, through Catholic church

Name of Godfather/Sponsor: _____

Name of Godmother/Sponsor: _____

AGREEMENT

I, _____ agree to pay a

\$75, **NON-REFUNDABLE FEE** to the parish to reserve the date of the Baptism. I understand that if the date is cancelled, the fee **WILL NOT BE REFUNDED** to me. This fee will be applied towards the total.

Name: _____ Signature: _____ Date: _____

OFFICE USE ONLY

Date: _____

Time: _____

Church: _____

Celebrant: _____

☐ Community Baptism

☐ Private Baptism

Date submitted: _____

Date approved: _____

By: _____

☐ Donation
(C)\$75.00 (P)\$125.00

☐ Donation Baptismal Prep
(I) \$25 (CPL) \$30 (P&GP) \$50

Total: _____

Paid: \$ _____ Bal: _____

Receipt #: _____

Receipt #: _____

DOCUMENTS NEEDED

- ☐ Registration Form
- ☐ Copy of Birth Certificate
- ☐ God Parent's Sacraments Certificates
- ☐ Pre-Baptismal Class Certificate
- ☐ Baptismal Prep Course:
- _____
- ☐ Cert. Printed: _____



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Forma de Registro para Bautismo

Nombre del Niño/a: _____

Fecha Nacimiento: _____ Lugar Nacimiento: _____ Estado: _____

Nombre del Padre: _____

Dirección: _____

Teléfono: _____ Religión: _____

Nombre de Soltera de la Madre: _____

Dirección: _____

Teléfono: _____ Religión: _____

Estatus Marital: ☐ Soltero/a ☐ Casado/a ☐ Divorciado/a ☐ Viudo/a

Si esta Casado/a: ☐ Civil ☐ Diaconó/Sacerdote Católico

La familia asiste a Misa regularmente? ☐ Si ☐ No

Están registrados en nuestras parroquias? ☐ Si ☐ No

Si, si por favor escriba su numero de sobre #: _____

Si es miembro de otra parroquia por favor de proveer nombre del Párroco y Parroquia: _____

Por favor note que los siguientes **requisitos son para los padrinos:**

☐ Bautizado/a en Iglesia Católica

☐ Asiste a Misa regularmente

☐ Si casado/a, en Iglesia Católica

Nombre del Padrino: _____

Nombre de la Madrina: _____

ACUERDO

Yo, _____ acepto pagar \$75 (**no reembolsable**) a la parroquia para reservar la fecha del Bautismo. Entiendo que si se **cancela** la fecha, **no se me reembolsará** el pago. Este pago se descontara del monto total.

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