

Nativity of Our Lady Catholic Community

221 Daly Ave San Luis Obispo CA 93405 Tel: 805-544-2357 Fax: 805-544-6756 www.NativitySLO.org

Baptism Class & Registration Form

Name of Child:	
Family Address:	
City: Phone	
Email Address:	
Email Address: Place of Birth:	
Father's Name:	
Religion of Father:	
Place of Birth:	
Mother's Maiden Name	
Mother's Maiden Name:	
Religion of Mother:	
Place of Birth:	
Were child's parents married by a Catholic priest?	
☐ We are registered parishioners OR	
☐ We are registered members at another church:	
Godparent #1:	
Is Godparent a baptized, confirmed, practicing Catholic?	
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Godparent #2/ Christian Witness:	
Is Godparent a Catholic?	
-	
Was the child privately baptized in other Religion? If so, please explain	ı:
Note: Baptism must be administered in the church.	
☐ Please return this completed form with copy of Birth Certificate	
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Baptism Scheduled for: @ Mass	
Location of Baptism:	
Name of Priest/Deacon:	
Baptism classes:	
•	hv
Parents: Date: by Godparents: Date:	by
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