



St. Brendan Catholic Church

10051 NE 195TH ST., BOTHELL, WA 98011 425.483.9400

Misa y Fecha del Bautizo: _____

El Bautizo se realizará Aquí Otro (ver al reverso)

Fecha del Contacto Inicial: _____

TODOS LOS DOCUMENTOS COMPLETOS DEBEN ENTREGARSE DOS SEMANAS ANTES DEL BAUTIZO

Nombre Completo del Niño: _____
Nombre(s) Apellido

Fecha de Nacimiento del niño: _____ Sexo: M F Raza Etnica: _____
(MM/DD/AAAA)

Lugar de Nacimiento del Niño: _____

Nombre de los Padres: _____
Nombre del Padre Apellido

_____ Nombre de la Madre Apellido/(Apellido de Soltera)

Dirección: _____
Calle y Número Ciudad Código Postal

Teléfono de Casa: () _____ Teléfono Adicional: () _____

E-mail: _____ Idioma: _____

Otro: _____

Nombres de los Padrinos: _____
Nombre(s) Apellido Parroquia y Afiliación Religiosa

_____ Nombre(s) Apellido Parroquia y Afiliación Religiosa

Los padrinos deben cumplir los requisitos de la Ley Canonica: tener por lo menos 16 años de edad y estar confirmado, estar actualmente registrado en una parroquia, y asistir a misa con regularidad.

Solo se requiere un padrino, pero se prefieren dos un hombre y una mujer. Si están en una relación y viviendo juntos, deben estar casados por la iglesia Católica.

Documentos Recibidos:

Fecha:

Clases:

Fecha:

- Registro de Parroquia Verificado _____
- Forma de Registro para Bautizo _____
- Certificado de Nacimiento _____

- Clase Bautizo Completada _____
- Pago (\$40.00) _____

Para uso de la Parroquia:

Documentado por: _____ en _____ Parish ID#

Bautizado por: _____ en _____

Registrado por: _____ en _____

Certificado por: _____ en _____

PDS entry por: _____ en _____



BAPTISM INTAKE

St. Brendan Catholic Church 10051 NE 195 ST, Bothell, WA 98011 425-283-9400

ALL PAPERWORK DUE TWO WEEKS BEFORE BAPTISM DATE

Baptism Date & Time: _____ To occur Here Away

Certificate in (English) or (Spanish)

Date of Initial Contact: _____ Interviewer _____

Full Name of Child: _____			
Child's DOB: _____ <small>(mm/dd/yyyy)</small>	Sex: M F	Ethnicity: _____	
Child's Place of Birth (City & State): _____			
Parents' Names: _____			
	Father's first name	Middle	Last
	Mother's first name	Middle	Last

Address: _____
No. & Street City

Home Phone: _____ Other Phone: _____

Email: _____ Language: _____

Godparent(s): _____		_____
First name	Last	(One Godparent must be Catholic)
_____	_____	_____
First name	Last	2 nd Catholic Godparent OR Christian Witness
<ul style="list-style-type: none"> - Godparents must meet Cannon Law requirements: be at least 16 and confirmed, currently registered in a parish, and attend mass regularly. - Only one godparent is required. Two are preferred, but must be male and female. If they are in a relationship and living together, they must be in a valid Catholic marriage. 		

<u>Documents Received:</u>	<u>Date:</u>	<u>Classes</u>	<u>Date:</u>
<input type="checkbox"/> Parish Registration	_____	<input type="checkbox"/> Preparation Completed	_____
<input type="checkbox"/> Birth Certificate (<input type="checkbox"/> State <input type="checkbox"/> Hospital)	_____	<input type="checkbox"/> Preparation Fee (\$40.00) paid	_____
<input type="checkbox"/> Godparent Verification	_____		

<i>Office use only:</i>	Parish ID#	<input type="text"/>
Documented by: _____	on _____	
Initiated by: _____	on _____	
Recorded by: _____	on _____	
Certificate by: _____	on _____	
PDS entry by: _____	on _____	



GODPARENT VERIFICATION FORM

St. Brendan Catholic Church 10051 NE 195 ST, Bothell, WA 98011 425-283-9400

ALL PAPERWORK DUE TWO WEEKS BEFORE BAPTISM DATE

The following person has been asked to be a godparent for a baptism at Saint Brendan Parish in Bothell, WA.

(name of godparent)

(full name of person to be baptized)

(scheduled date of baptism)

THE PART BELOW IS TO BE COMPLETED BY GODPARENT'S PARISH

By signing and returning this form, you are certifying that he/she meets the requirements of Canons 872-874 and is a parishioner in good standing in your parish.

(name of godparent's parish)

(address of parish including street, city, state & zip code)

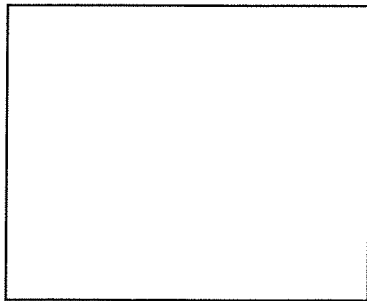
_____ Godparent has taken baptismal preparation classes at our parish within the last 2 years.

_____ Godparent will take baptismal preparation classes at Saint Brendan.

_____ Godparent will provide proof of taking baptismal preparation class at their parish

(printed name of pastor or pastoral assistant)

(signature of pastor or pastoral assistant)



←Affix Parish Seal Here

*Return this form to:
St. Brendan Catholic Church
10051 NE 195th ST
Bothell WA 98011-2931
425-483-9400 (phone)
425-486-9735 (fax)*

- Godparents must meet Cannon Law requirements: be at least 16 and confirmed, currently registered in a parish, and attend mass regularly.
- Only one godparent is required. Two are preferred, but must be male and female. If they are in a relationship and living together, they must be in a valid Catholic marriage.