

Office Use Only:  
Form received in office

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Baptism Scheduled for

**DATA OF BAPTISM**  
Please Print - Use Full Names  
Answer Each Question As Completely As Possible

Name of Child \_\_\_\_\_  Male  Female

Date of Birth \_\_\_\_\_ City & State of Birth \_\_\_\_\_

Father's Full Name \_\_\_\_\_ Religion \_\_\_\_\_  
(First) (Middle) (Last)

Mother's Full Name \_\_\_\_\_ Religion \_\_\_\_\_  
(First) (Middle) (Maiden Name)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Parents Married by \_\_\_\_\_ Church \_\_\_\_\_ Date \_\_\_\_\_

Child's Godfather \_\_\_\_\_ Religion \_\_\_\_\_

Child's Godmother \_\_\_\_\_ Religion \_\_\_\_\_

Baptism to be performed by \_\_\_\_\_ Date \_\_\_\_\_

- Baptism at St. John the Evangelist  Baptism at Blessed Sacrament
- by Immersion  by Pouring of Water

**If Baptism is during Mass, how many pews would you like reserved for family and guests? \_\_\_\_\_**  
**If your family would like to bring up the gifts during Mass please contact Louise Ambroziak at 810-431-0001 for St. John or Gail Fielder at 810-743-7841 for Blessed Sacrament.**

Name of Church you are now registered in \_\_\_\_\_

City

State

**Please answer the following questions:**

**1. What does it mean for you to be a Christian mother/parent to your child?**

**2. What does it mean for you to be a Christian father/parent to your child?**

**3. Why are you bringing your child to this church for baptism?**

**PLEASE RETURN THIS FORM TO THE CATHOLIC COMMUNITY OF  
ST. JOHN THE EVANGELIST AND BLESSED SACRAMENT  
ST. JOHN CAMPUS PARISH OFFICE, 404 BUILDING  
TWO WEEKS PRIOR TO BAPTISM DATE  
God bless you and your child**

*The Catholic Community of  
St. John the Evangelist and Blessed Sacrament*

404 N. Dayton Street  
Davison, Michigan 48423  
(810) 653-2377 Fax: (810) 658-1123

&

6340 Roberta Street  
Burton, Michigan 48509  
(810) 742-3151 Fax: (810)742-1409

Name of Child: \_\_\_\_\_

Name of Catholic Godparent(s): \_\_\_\_\_

Dear Friend:

**You have been asked to serve as Godparent for \_\_\_\_\_.**  
**Godparents serve as Faith-Models for their Godchild. In accepting the responsibility of serving as Godparent, you are indicating your willingness to fulfill your own religious obligations. Catholics serving as Godparents are expected to be registered members of their local church, attend Mass regularly and receive the sacraments frequently. One Godparent must meet these requirements. The other person can be of another Christian tradition and serve as a Christian witness. They should be actively involved in their own church community.**

Children grow and move toward spiritual maturity in the company of others – parents, grandparents, brothers and sisters, and other adult members of the Church. It is in the faith example of others that children learn and develop a personal faith life. Without the nurturing effect of this example baptized infants will remain spiritual infants throughout their lives. Children mature by moving from dependence to independence to adult interdependence.

We encourage the Godparents and Christian witness to attend the Baptism Formation sessions at the Catholic Community of St. John the Evangelist and Blessed Sacrament or in their own parish community if they live outside the area.

Catholics serving as Godparents assume the special responsibility of being living examples of what it means to follow Jesus Christ within the Catholic tradition. For this reason, the Godparents are asked to sign the bottom and return to St. John two weeks prior to the Baptism.

I, the undersigned, am fully aware of my responsibilities as a Godparent and promise to fulfill these responsibilities to the best of my ability. I do so with full awareness that my example in following Christ will be of the utmost importance in the spiritual development of my Godchild.

Godparent(s)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
City/State/Zip

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**God bless you and your Godchild**