

# BAPTISM REGISTRATION FORMS

## SAINT CHRISTOPHER CATHOLIC CHURCH

1000 Michigan Avenue

Marysville, MI 48040

Phone: 810-364-4100

Fax: 810-364-5947



Dear Parents,

Enclosed are the forms and guidelines for obtaining the Sacrament of Baptism for Infants at St. Christopher's. "Infants" are newborns until 6 years of age. If the child you wish to have baptized is age 7 or older, please contact the Pastor.

Please read this information carefully and provide us with all information necessary as you prepare for the baptism of your child. All information needed is in conformity with the Guidelines for Infant Baptism for the Archdiocese of Detroit.

Baptism is no mere social convention, but the Sacrament in which Christ Himself purifies, justifies and sanctifies (cf. 1 Peter 1:23) your child for eternal life. We rejoice with you in the birth of your child and look forward to welcoming him/her into the family of God and the communion of the Holy Catholic Church.

Please contact our Parish Office 810-364-4100 if you have any questions, and may God bless you and your child.

# CHECKLIST FOR BAPTISM OF INFANTS

## SAINT CHRISTOPHER CATHOLIC CHURCH

1000 Michigan Avenue  
Marysville, MI 48040

### FOR PARENTS:

- \_\_\_ Attend a Baptism Preparation Class, either at St. Christopher's or another parish (unless you have taken a baptism class previously - **you may not need to take another class**).
- \_\_\_ Complete Infant Baptism Request Form and turn it in to the Parish Office, **along with the following:**
  - ◆ Copy of your child's state-registered Birth Certificate (will be shredded after Pastor's viewing).
  - ◆ Certificates of attendance at a Baptism Preparation class for parents and Godparents.
  - ◆ **If you are not a parishioner of St. Christopher's** - A letter from your parish pastor granting permission for your child to be baptized at St. Christopher's.
  - ◆ Letters of Verification of Full Communion with the Church from the parish of each Godparent.
  - ◆ Completed and signed Godparent Certificates.
  - ◆ Copy of custody order (if applicable)
- \_\_\_ Meeting with the Pastor is required

### FOR GODPARENTS\*:

- \_\_\_ Inform Godparents of their requirements to attend a Baptism Preparation Class (again, if they have taken one of these classes previously, this may not be necessary).
- \_\_\_ Have each Godparent fill out and sign a Godparent Certificate.
- \_\_\_ Ask each Godparent to request a Letter of Verification of Full Communion with the Church from their parish. The letter must be signed by the pastor and stamped with the parish seal.

**\*For a person to stand as a Godparent or Sponsor, the following requirements must be met:**

- ◆ Be designated by the candidate, parents, guardians, or pastor
- ◆ Have the intention of performing the role of sponsor
- ◆ Be at least 16 years old (some exceptions possible)
- ◆ Be a fully initiated Catholic (received Baptism, First Communion and Confirmation)
- ◆ Lead a life in harmony with the Faith and role of a sponsor (i.e. be a registered member of a parish, attend Mass on Sundays and Holy Days and faithful to the laws of the Church regarding marriage. If married, then married in the Catholic Church before a Catholic Priest or Catholic Deacon).
- ◆ Not bound by any canonical penalty
- ◆ Not the father or mother of the candidate

At least one of the persons you choose must fulfill these requirements. If you wish to honor a non-Catholic member of your family, they may stand as a Christian Witness to your child's Baptism, provided they have already been baptized.

# INFANT BAPTISM REQUEST FORM

## SAINT CHRISTOPHER CATHOLIC CHURCH

1000 Michigan Avenue

Marysville MI 48040

Please print all information clearly.

Name of Child: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

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

Name of Mother: First \_\_\_\_\_ Middle \_\_\_\_\_ Maiden \_\_\_\_\_

Church of Baptism (Mother) \_\_\_\_\_ Currently Practicing Which Religion \_\_\_\_\_

Name of Father: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Church of Baptism (Father) \_\_\_\_\_ Currently Practicing Which Religion \_\_\_\_\_

Mailing Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email \_\_\_\_\_

Parish where you are registered \_\_\_\_\_ How long? \_\_\_\_\_

How often do you attend Mass (weekly, monthly, never or other)? Mother \_\_\_\_\_ Father \_\_\_\_\_

How often do you receive the Sacraments? Mother \_\_\_\_\_ Father \_\_\_\_\_

Are you aware that the Church teaches that we are to receive the Sacraments of Reconciliation and Eucharist at least once per year? yes \_\_\_\_\_ no \_\_\_\_\_ I am now \_\_\_\_\_

How are you involved in parish life? \_\_\_\_\_

Requested Date of Baptism : \_\_\_\_\_

### Questions Regarding Marriage and Family

Are you married? \_\_\_\_\_ Name of Church \_\_\_\_\_

Date of Marriage \_\_\_\_\_ City & State \_\_\_\_\_

If not married in a church, where were you married? \_\_\_\_\_

Did you, as an individual/couple, decide to marry outside of the Catholic Church because of a divorce situation? \_\_\_\_\_

Were you given permission by the Catholic Diocese in which you were married to have your wedding at a place other than a Catholic Church, if applicable? \_\_\_\_\_

Number of children \_\_\_\_\_ Ages \_\_\_\_\_

Are the children enrolled in a religious education program or in a Catholic school? \_\_\_\_\_

We hereby request the Sacrament of Baptism for our child:

Father \_\_\_\_\_ Date \_\_\_\_\_

Mother \_\_\_\_\_ Date \_\_\_\_\_

# GODPARENT/SPONSOR CERTIFICATE

## SAINT CHRISTOPHER CATHOLIC CHURCH

1000 Michigan Avenue  
Marysville, MI 48040

I, \_\_\_\_\_,  
a registered member of \_\_\_\_\_ Catholic Church,  
located in (City & State) \_\_\_\_\_,  
have been asked to be a godparent for (Child's Name) \_\_\_\_\_,  
Son/Daughter of (Parents' names) \_\_\_\_\_  
who resides at (Parents' Address) \_\_\_\_\_  
as he/she celebrates the Sacrament of Baptism.

### I AFFIRM THAT:

- ◆ I have received the Sacraments of Initiation (Baptism, Eucharist and Confirmation) in the Catholic Church and, if married, am validly married according to the norms of the Catholic Church.
- ◆ I participate regularly in Sunday Mass and am able to receive the Holy Eucharist.
- ◆ I actively witness to my faith in Jesus Christ by the way I live in service and love to the people with whom I come in contact daily.
- ◆ I shall give Christian witness and pray for my Godchild as his/her Godparent.
- ◆ I understand and accept the responsibility that I undertake as a Godparent.

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*Signature of Godparent*

*Date*

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*Signature and Seal of Pastor*

*Date*

# GODPARENT/SPONSOR CERTIFICATE

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*Signature of Godparent*

*Date*

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*Signature and Seal of Pastor*

*Date*