

PRE-BAPTISMAL INFORMATION FORM
ASCENSION OF OUR LORD CATHOLIC CHURCH
Donaldsonville, Louisiana 70346-0508
Tel. (504) 473-3176

LAST Name of Child to be baptized: _____

FIRST & MIDDLE Names of Child to be baptized: _____

DATE of Birth: _____ **CITY of Birth:** _____

ANTICIPATED DATE & TIME of Baptism: _____
**read item #5 of policy brochure before completing*

Father's FIRST, MIDDLE, & LAST NAME: _____

Father's RELIGION: _____

Mother's FIRST, MIDDLE, & MAIDEN NAME: _____

Mother's RELIGION: _____

Godfather's FIRST, MIDDLE, & LAST NAME: _____

**read carefully item #3 of policy brochure before completing*
Godfather's RELIGION: _____

Godmother's FIRST, MIDDLE, & MAIDEN NAME: _____

**read carefully item #3 of policy brochure before completing*
Godmother's RELIGION: _____

**if selected godparents are not active members of Ascension Church parish, a letter from their respective pastor is necessary, testifying that they are church-going, practicing members of their church, and meet the other qualifications established by the Catholic Church to serve in this role.*

In which Church parish are the parents of the child registered? _____

**Parents requesting baptism of their children, as a minimal requirement and by policy of the Diocese of Baton Rouge, must be registered in the Church parish, have attended a pre-baptismal instruction session, be actively participating at Sunday & Holy Day Masses, and be regularly contributing to the support of the parish. If parents are not officially registered in the parish, i.e. receiving the weekly bulletin by mail, receiving contribution envelopes, etc., please accomplish this through the parish secretary before or at the time you submit this information form.*

If parents of child were married by a Catholic priest/deacon, in which church did the marriage ceremony take place? _____

**If parents are not married in the Catholic Church, they should be willing to begin taking whatever steps are necessary to accomplish this.*
City: _____

Diocese: _____

(COMPLETE BOTH SIDES OF THIS FORM)

**If parents requesting baptism of a child are not married, either a state issued "Certificate of Live Birth" or a "Declaration of Paternity" signed by the father of the child, will be necessary before the father's name can be recorded in the Baptism record.*

Complete Mailing Address of Child's Parents:

Telephone: _____

Complete the following items which apply to your request for Baptism:

- _____ Parents _____ & godparents need to schedule a "Pre-baptismal instruction session" with pastor/associate pastor or Pre-Baptismal Instruction Team.
- _____ Parents have attended a "pre-baptismal instruction session" within the past three years with Father _____ at Ascension Church.
- _____ Parents have attended a "pre-baptismal instruction session" within the past three years at _____ Church with Father _____ and a letter is attached in witness of this fact.
- _____ Godparents have attended a "pre-baptismal instruction session" within the past three years with Father _____ at Ascension Church.
- _____ Godparents have attended a "pre-baptismal instruction session" within the past three years at _____ Church with Father _____ and a letter is attached in witness of this fact.
- _____ Godparents are active members of another Church parish, and a letter from their pastor is attached in witness of this fact.
- _____ Parents are not married, and mother does not wish the name of father to be declared.
- _____ Parents are not married, and to record the name of the father on the baptismal record, either a "Declaration of Paternity" signed by father, or a "Certificate of Live Birth" is attached.

PARENTAL DECLARATION: I have fully read and understand the "Policy Regarding the Sacrament of Baptism of Infants":

Signed: _____
(parent's signature)

Date: _____

FOR OFFICE USE ONLY:

Pre-baptism Instruction Session scheduled for: _____ Completed by: _____

Baptism scheduled for: _____ Baptism completed by: _____

(COMPLETE BOTH SIDES OF THIS FORM)