



**CHURCH OF THE PRESENTATION**  
**BAPTISM PREPARATION REGISTRATION**  
 (To be completed if taking class here and baptize at another parish)

**CHILD'S FULL NAME** \_\_\_\_\_

**PARISH WHERE BAPTISM WILL TAKE PLACE** \_\_\_\_\_

**CITY, STATE** \_\_\_\_\_

**PERSON(S) ATTENDING PREPARATION:** (Please complete all that apply)

**Name** \_\_\_\_\_

**I am the child's:**

**Father**       **Mother**       **Godfather**       **Godmother**

**Name** \_\_\_\_\_

**I am the child's:**

**Father**       **Mother**       **Godfather**       **Godmother**

**Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**City, State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Parish in which you are registered** \_\_\_\_\_

**Date of BAPTISM CLASS CHOSEN:** \_\_\_\_\_

(Registration **MUST** be done a minimum of **TWO WEEKS** prior to class date)

**FEES (per person):** Registered six months or more is \$25  
 Not registered or registered less than six months is \$40  
 (Due at time of registration)

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**FOR OFFICE USE ONLY**

**Registration Fee:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_

**Notes:** \_\_\_\_\_

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