



Mary, Queen of Angels, Champaign County

Immaculate Conception

Sacred Heart

St. Mary

St. Michael

Request for Baptism

Please return this completed form to the Parish Office at: St. Mary Church 231 Washington Ave. Urbana, OH 43078

To be filled out by parents:

Please **print**.

Child's Name: _____

Address: _____

Telephone: _____

Date of Birth: _____

City & State of Birth: _____

Father's Full Name: _____

Church of Baptism (name, city, state) _____

Mother's Full Maiden Name: _____

Church of Baptism (name, city, state) _____

Parents' Marriage:

Catholic Marriage: Yes _____ No _____ Not married _____

Place of Marriage (name of church or other location; city & state):

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Godfather: _____

Church of Baptism (name; city & state): _____

Current parish (name; city & state): _____

must have a letter of member in good standing from his current parish

Godmother: _____

Church of Baptism (name, city & state): _____

Current parish (name, city & state): _____

must have a letter of member in good standing from her current parish

Christian Witness: _____

Church of Baptism (name, city & state): _____

Current church (name, city & state): _____

must have a letter of member in good standing from their current church