



SS. Viator and Wenceslaus Parish

4170 W. Addison St. Chicago, IL 60641 773-286-4040

Baptism Registration Form

St. Viator site St. Wenceslaus site

Date of Birth ____/____/____

ENGLISH SPANISH

Birth Certificate Yes No

Child's Name _____ Last Name _____

City of Birth _____ Country of Birth _____

Father's Name _____ Religion _____ Class Attendance

Mother's Name _____ Religion _____ Class Attendance
Maiden Name _____

Address _____
Street Apt. No. City State Zip code

Parent's Telephone Number _____

Godmother's Name _____ Single Married Class Attendance

Wedding date _____ Name of Church _____ Address _____

Godfather's Name _____ Single Married Class Attendance

Wedding date _____ Name of Church _____ Address _____

Representatives? (Proxy) for the Godparents Yes No Names _____

Did the Child receive an Emergency Baptism? Yes No Where? _____

If the father or mother will not be present for the baptism, please sign below:

I am aware that my child will receive the Sacrament of Baptism at St. Wenceslaus Church.
Although I will not be present, I give my permission:

Signature of mother or father **who will not** be present at Baptism.

FOR OFFICE USE ONLY

Name of Priest who administered Baptism _____

Date of Baptism _____ Registered: Book # _____ Page# _____ Entry # _____

By _____ Date _____ Paid: _____ R#: _____
Date: _____ Initials: _____