**Questionaire by baptism**

*The information requested here is for the baptismal certificate and will be kept confidential.*

|  |  |
| --- | --- |
| **Contact details:** |  |
| **Contact person** |  |
| **Phone number** |  |
| **E-mail** |  |
|  |  |
| **Details father**  |  |
| First name  |  |
| Last name |  |
| Place of birth  |  |
| Religion / denomination |  |
| Address **(*in case child is being baptised*)** |  |
|  |  |
| **Details mother**  |  |
| First name  |  |
| Last name |  |
| Place of birth |  |
| Religion / denomination |  |
| Address **(*in case child is being baptised*)** |  |
|  |  |
| **Details person to be baptised** |  |
| First name  |  |
| Last name |  |
| Date of birth |  |
| Place of birth |  |
| Baptismal name |  |
| Address (if adult) |  |
| Patron saint |  |
| Name day |  |
|  |  |
| **Date of baptism** |  |
| Godfather |  |
| Godmother |  |
| Priest |  |
|  |  |
| Parents married in church? |  |
| If so, in which church? |  |
| Church wedding date |  |
| Priest church wedding |  |
| If not, date and place of civil marriage |  |
|  |  |
| **Signature priest after baptism** |  |