

# St. Joseph's Catholic Church

192 E. HENRI DE TONTI PO BOX 39 TONTITOWN, ARKANSAS 72770  
(479) 361-2612 E-Mail: stjoeontitown1@att.net

## Infant Baptism Requirements:

*Parents are obligated to see to it that infants are baptized within the first weeks after birth: as soon as possible after the birth or even before it parents are to go to the pastor to request the sacrament for their child and to be properly prepared for it.  
Code of Canon Law # 867*

- ✘ Must be registered members of this parish. Persons registered at another parish must have their pastor's permission and must have completed the required Baptism preparation at either their home parish, or this one.
- ✘ Parents must attend Mass regularly.
- ✘ At least one parent has to be Catholic.
- ✘ Only one male or one female sponsor or one of each gender shall be used (Can 873).
- ✘ Godparents must be able to provide a letter of Recommendation from their pastor.
- ✘ At least one Godparent must be Catholic. See qualifications below (Can 874):
  - Have the qualifications and intention of performing this role;
  - Be at least 16 years of age.
  - Be a Confirmed Catholic, have received the sacrament of the Eucharist and lead a life in harmony with the faith and the role to be undertaken.
  - If married, was married with the blessing and approval of the Catholic Church.
  - Can not be the mother or father of the one being baptized.
- ✘ Those from a non-Catholic ecclesial community may only serve as a witness to Baptism and together with a Catholic sponsor.
- ✘ Parents and Sponsors must attend a Baptism class. If sponsors live out of town, they can attend a class in their own parish.

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## Office Use Only:

Godparent Forms: \_\_\_\_\_

Member Forms: \_\_\_\_\_

Book: \_\_\_\_\_

PDS: \_\_\_\_\_

Letter: \_\_\_\_\_

Cert: \_\_\_\_\_

Bull: \_\_\_\_\_

Date /Time of Baptism: \_\_\_\_\_

## Baptism Information:

### Child's Information:

Name of Child: \_\_\_\_\_  
First Middle Last

Male Female  
Please Circle Child's Gender

Address of Child: \_\_\_\_\_

Telephone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth (City, State) \_\_\_\_\_

Requested date of Baptism: \_\_\_\_\_ Was the child adopted? Y N

### Parent's Information:

Father's Full Name: \_\_\_\_\_  
First Middle Last

Father's Religion: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
First Middle Last (Married Name)

Mother's Religion: \_\_\_\_\_

Married by a Catholic Priest? (Circle One) Y N On \_\_\_\_\_  
Date

Church: \_\_\_\_\_

### God Parent Information:

God Father Name: \_\_\_\_\_ Catholic? Y N  
First Middle Last

God Mother Name: \_\_\_\_\_ Catholic? Y N  
First Middle Maiden Last

Is either Godparent going to be represented by a stand-in? Y N

Name of Stand-in: \_\_\_\_\_  
First Middle Maiden Last

**Please bring this form to your Baptismal Class or the Parish Office prior to the Baptism.**