Immaculate Heart of Mary Catholic Church

511 W. Washington St. P.0. Box 313 Greenwood MS 38935-0313

Office: (662) 453-3980 E-mail: ihmeditor@gmail.com



BAPTISMAL REGISTRATION FORM

Please print all information clearly. All in	formation is confident	ial and recorded in IHM Parish Registry.
Baptism Date Requested:		
Child's Full Name: (First)	(Middle)	(Last)
Address: (Street)	(City)	(State) (Zip)
Date of Birth: City and St	tate of Birth:	
Gender of Child: Male () Female ()	Was the child	adopted? Yes () No ()
I	PARENT INFORMATIO	N
Father's Full Name: (First)	(Middle)	(Last)
Religion of Father:	_ Father Confirmed?	Yes () No ()
Mother's Full Name: (First)	(Middle)	(Last)
Religion of Mother:	Mother Confirmed	d? Yes ()No ()
Are parents registered members of IHM required from your Parish.	? Yes()No()If you	u are not a member of IHM, permission is
Marital Status of Parents (married/single If yes, provide name of Church, City, and		Catholic Church Marriage: Yes () No ()
Email address:	Phone	Number:

GODPARENT INFORMATION

- The Catholic Church requires the following of Godparents (Canon 874.1): •
- The godparents are to be chosen by the parents or guardians. •
- They are to be at least sixteen years of age. •
- They must be Catholics who have already been Confirmed, and have received the holy Eucharist. •
- They should be leading a life in harmony with the faith; i.e., practicing Catholics (attending Mass), • if married, in a valid Catholic Marriage, etc.
- They may not be the father or mother of the one to be baptized. •
- You may choose one or two godparents. If you choose two, one must be male and the other • female.
- The godparents must have the qualifications for and intention of carrying out this duty.

**Non-Catholic Witness (Can.874.2) A baptized person belonging to a non-Catholic ecclesial (church) community may be admitted as a witness to baptism but only along with a Catholic Godparent. This person is not formally called a Godparent but will be referred to as a Christian Witness.

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GODPARENT INFORMATION

Name of Male Godparent:	Member of IHM: Yes () No ()
If not, where:	_ (A Certificate of Eligibility is required from Godparents parish)
Name of Female Godparent:	Member of IHM: Yes () No ()
If not, where:	_ (A Certificate of Eligibility is required from Godparents parish)
СНЕ	RISTIAN WITNESS INFORMATION
Name of Christian Witness:	
Faith in which Christian Witness was I	Baptized:
Provide name of Church, City, and Sta	te:
E	BAPTISM CLASS PREPARATION
Have Parents attended a baptismal pro	eparation class? Yes () No () If yes, where?
Have Godparents attended a baptisma	al preparation class? Yes () No () If yes, where?
	CERTIFICATION
	rmation provided on this form, is true and correct; and I hereby give ove-named child in the Catholic Church.
Signature of Parent(s):	Date:
Signature of Parent(s):	Date:

The following must accompany Baptism Registration Form:

- A copy of child's birth certificate
- If child is adopted, legal documentation
- If parents are single or divorced, please attached legal documentation verifying guardianship