

HOLY FAMILY OF NAZARETH CATHOLIC CHURCH  
2330 CHEYENNE STREET  
IRVING, TEXAS 75062  
972-252-5521, FAX 972-252-5523

### Baptism Class Registration

Are you registering for class as  parent or  Godparent?

Today's Date \_\_\_\_\_ Date of class to attend \_\_\_\_\_

Mother's Name \_\_\_\_\_ Maiden name \_\_\_\_\_

Father's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Best phone # to contact you \_\_\_\_\_

Best email(will not be shared) \_\_\_\_\_

Registered member of Holy Family of Nazareth?  yes  no

If NO, please enter your parish name \_\_\_\_\_

Never married

Married, Catholic Church marriage?  no  yes  other church

Church name, city, state \_\_\_\_\_ date of marriage \_\_\_\_\_

Widowed  Divorced  Divorced and annulled  Divorced and remarried

Divorced, annulled and remarried

***If child is to be baptized at Holy Family and you are the parent, please complete the following:***

Child's name \_\_\_\_\_ Date of Birth \_\_\_\_\_  boy  girl

Godparent name \_\_\_\_\_ phone: \_\_\_\_\_

Name of Church Godparent Attends \_\_\_\_\_

Godparent name \_\_\_\_\_ phone: \_\_\_\_\_

Name of Church Godparent Attends \_\_\_\_\_

Will you need childcare during class Saturday 9am-12 pm?  no  yes, names and ages\_

**Return this form to the parish office or email to [baptism@holyfamilychurch.net](mailto:baptism@holyfamilychurch.net)**