

ST Elizabeth of Hungary Church
66700 Pierson Blvd., Desert Hot Springs CA 9224
Office (760) 329-8794 Fax (760) 329-6760

Date of Baptism _____ Español _____ Eng _____

Class only: _____

Today's Date: _____ Name of the child: _____

Date of birth: _____ Place of birth: _____

Is the child adopted? _____ Was the child privately baptized? _____

If yes please explain: _____

Father's name: _____

Mother's name: _____

address: _____

Phone number: () _____ Emergency phone number () _____

Godmother's name: _____ Religion: _____

Phone number: () _____

Godfather's name: _____ Religion: _____

Phone number: _____

Donation: _____ Receipt number: _____

If you wish to baptize in this Parish you must attend the required Pre-Baptism Class and bring the following documents:

1. Birth Certificate of the child to be Baptize,
2. Completed Baptism Register form,
3. Copy of the Sacrament of Confirmation for the sponsors.

Regulations:

1. If you live in another city, you must ask your Parish for a letter of Permission to Baptized in this Parish.
2. \$50.00 per child if you are a participating registered parishioner. \$100.00 if you are not participating registered parishioner. (NO REFUNDS).
3. \$25.00 per person to take the class only.
4. All payments must be paid at the parish office. No payment or collection is to be done during the Pre-Baptismal Seminar.

Suggestions for Parents:

You must choose godparents that will be good role models for your child.

Godparents must be active Catholics they must attend Mass and receive Sacraments of Reconciliation and Eucharist.

Godparents must be older than 16 years of age and must have received the Sacrament of **Confirmation** and present a copy of certificate to the parish office.

I have read the above rules and understand my obligations

Agreed to: _____ Date: _____

IGLESIA DE SANTA ELIZABETH DE HUNGRIA
FORMULARIO DE BAUTIZO

FECHA DEL BAUTIZO _____

ESP _____

ING _____

CLASES SOLAMENTE _____ Fecha de hoy _____

Fecha de hoy: _____

Nombre del niño/a: _____

Fecha de Nacimiento: _____

Ciudad donde nació: _____

El niño/a es adoptado? _____

El niño/a fue bautizado en privado? _____

Nombre del padre: _____

Teléfono y religión: (_____) _____

Nombre de la Madre: _____

Teléfono y religión: (_____) _____

Dirección: _____

Están registrados en la parroquia? _____

Nombre del padrino: _____

Teléfono y religión: (_____) _____

Nombre de la madrina: _____

Teléfono y religión: (_____) _____

Honorarios: \$ _____ Recibo No.: _____

Los honorarios se pagaran en la oficina de la Iglesia. No se permite honorarios o colectas en las clases pre-bautismales. (NO REEMBOLSO) Firma: _____

Para uso de la oficina: Confirmación de la madrina: si _____ no: _____ Platicas pre bautismales: si _____ no _____ Padrino Confirmación: si _____ No _____ Platica pre bautismal: si _____ No _____