

Baptism Registration Packet



Sacred Heart Parish

Oxford, PA



Congratulations!



Dear Parents,

Congratulations on choosing baptism for your child!

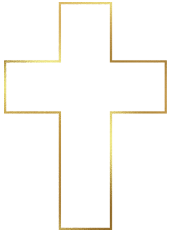
It is a glorious day in Heaven and on Earth when another soul joins the Body of Christ!

Before your child's big day, we would like you to complete the following:

- ✝ Read this packet in its entirety and visit our website at <https://www.sacredheart.us/baptism> or use the QR code below for more detailed information regarding our baptismal procedures. If you have any questions, contact Alexis Witiak at faithformation@sacredheart.us or call the office at 610-932-5040.
- ✝ Complete the attached Baptism Registration Form and **personally hand it** to Father Anthony Raymundo after a weekend or weekday Mass. After greeting the congregation, Father will spend about 5-10 minutes with you to review your registration form and further speak with you regarding this special day.
- ✝ If your child's Godparent/Sponsor is a practicing Catholic who attends Sacred Heart Parish, provide him/her with the attached Godparent/Sponsor Form. Godparents/Sponsors **must also personally hand in their form** to Father Anthony. More information regarding Godparents/Sponsors can be found online.
- ✝ Turn in all required paperwork (i.e Godparent/Sponsor Forms) **NO LATER THAN** the Sunday before the scheduled baptism.
- ✝ Attend a scheduled Pre-Jordan class led by Father Anthony. (If applicable)

*We look
forward to
celebrating
with you!*





Baptism



REGISTRATION FORM

Child's Full Name: _____

Gender: ☐ Male ☐ Female Requested Date of Baptism: _____

Place and Date of Birth: _____
(City, State) (MM/DD/YYYY)

Family Information

Father's Name: _____

Religion: ☐ Catholic ☐ Other

Mother's Name: _____

Religion: ☐ Catholic ☐ Other (First, Maiden Name)

Contact Information

Phone Number: _____

Email Address: _____

Godparent/Sponsor Information

Name of Godparent/Sponsor #1: _____

Phone Number: _____ Practicing Catholic? ☐ Yes ☐ No

Name of Godparent/Sponsor #2: _____

Phone Number: _____ Practicing Catholic? ☐ Yes ☐ No

Additional Information

Would you like to receive more information about Sacred Heart Parish? ☐ Yes ☐ No

Would you allow your child's name to be printed in the Parish Bulletin? ☐ Yes ☐ No

Approved by Father

Date of Pre-Jordan Class

☐ N/A

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