

Ascension of Our Lord Byzantine Catholic Church
114 Palace Lane
Williamsburg, VA 23185-2942
Pastor- Father Alex Shuter 757-585-2787

BAPTISMAL REGISTRATION FORM

Child's Name: _____

Date of Birth: _____

Place of Birth: _____

Family home address: _____

Phone Number: (____) _____

PARENTS

Father's Name: _____

Is Father Byzantine Catholic? YES _____ NO _____

Member of which Church? _____

Domination? _____

Mother's **MAIDEN** Name: _____

Is Mother a Byzantine Catholic? YES _____ NO _____

Member of which Church? _____

Domination? _____

GODPARENTS

* Godfather's Name: _____

Is Godfather Catholic? YES _____ NO _____

Member of which Church? ** _____

Domination? _____

* Godmother's Name: _____

Is Godmother Catholic? YES _____ NO _____

Member of which Church? ** _____

Domination? _____

*** Both Godparents' will need a letter from their pastor stating they are parishioners and are in good standing with the Catholic Church.**

Preferred Date of Baptism: _____