



## *St. Lawrence Martyr Parish*

2210 Lawrence Av East, Scarborough Ontario M1P 2P9

Phone: 416-759-9359 Fax: 416-759-6725

Email: stlawrencemartyr@archtoronto.com

# Baptism Registration Information

1. Baptism is a celebration of a living relationship with God and with the local parish community. It is normally celebrated in the parish where **the family resides or is registered and usually worships**. Parents who belong to another parish and wish to have their child baptized at St. Lawrence Martyr Parish must obtain a letter of permission from the Pastor of the parish where they reside, or is registered and usually worship.
2. We require a photocopy of the Catholic **Baptism** Certificate of **at least one** of the Parents. As well, we require a photocopy of the **Confirmation** Certificate of **both Godparents** be provided for the interview. We have also been asked by the Archdiocese to request a photocopy of the **Birth Certificate of the child** being baptized so we can ensure the correct spelling of the child's last name. **All required documentations** must be collected before the interview with the parish priest.
3. During the interview, the priest will also review some dates for Baptism. Parents are also required to attend a one-hour baptismal preparation class in advance of the Baptism. This will be finalized in the interview meeting.
4. It is important to select Godparents (Sponsors) that are also practicing Catholics, who will be good role models for the child as they grow in faith.
5. Only Catholics can be Godparents. It is necessary to have at least one Godparent. However, a Non-Catholic Christian can be chosen as a Christian Witness in place of one Godparent, provided he/she is from a Church recognized by the Catholic Church. Please consult a priest if need be.

### **Eligibility of Sponsors (Godparents)**

There is to be only one male sponsor or one female sponsor or one of each. (canon 873)

The following are the requirements in order for a Catholic to be a sponsor: (canon 874 §1)

- At least 16 years of age
- He/she has been fully initiated in the Catholic Church (received Baptism, Holy Communion and Confirmation)
- In good standing with the Church (e.g. has not married outside the Catholic Church; not cohabitating)
- Not the mother or father of the one to be baptized

### **Eligibility of Christian Witness**

- A Christian Witness for a child's baptism must be validly baptized Christian of a Non-Catholic Church. (canon 874 §2)
- A Christian Witness may only participate together with a Catholic sponsor. (canon 874 §2)



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# Baptism Registration Form

PLEASE PRINT CLEARLY Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
First Middle Last

Male: \_\_\_\_\_ Female: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
day/month/year City/Province/Country

Father's Full Name: \_\_\_\_\_  
First Middle Last

Religion: Roman Catholic \_\_\_\_\_ Other: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_  
First Middle Last

Religion: Roman Catholic \_\_\_\_\_ Other: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Church, or place of Marriage: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_  
day/month/year

### FOR OFFICE USE ONLY:

Date of Interview: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

Date of Baptism Class: \_\_\_\_\_ Minister of Baptism: \_\_\_\_\_

Entered into PT: \_\_\_\_\_ Entered into Register: \_\_\_\_\_

Comments: \_\_\_\_\_

Baptism Certificate: Father's ☐ Mother's ☐ Confirmation Certificate: Godfather's ☐ Godmother's ☐  
Child's Birth Certificate: yes ☐ no ☐

PLEASE COMPLETE BOTH SIDES OF THIS FORM

## Catholic Sponsor's Information

**Godfather's Full Name:** \_\_\_\_\_  
First Middle Last

Current Parish: \_\_\_\_\_ City: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

☐ Fulfils the requirements of canon (canon 874 §1)

**Godmother's Full Name:** \_\_\_\_\_  
First Middle Last

Current Parish: \_\_\_\_\_ City: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

☐ Fulfils the requirements of canon (canon 874 §1)

## Christian Witness Information

**Christian Witness Name:** \_\_\_\_\_  
First Middle Last

Christian Denomination: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Declaration

I, the undersigned, declare that the information on this form is true and accurate.

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE SUBMIT THIS FORM TO THE PARISH OFFICE.**