

**BAPTISM FORM OUTSIDE PARISH  
ST. ROSE PHILIPPINE DUCHESNE PARISH  
ANTHEM, ARIZONA 623-465-9740**

COMPLETED CLASS: \_\_\_\_\_  
BAPTISM DATE: \_\_\_\_\_  
SENT TO PARISH OFFICE: \_\_\_\_\_  
LETTER MAILED BY PARISH OFFICE: \_\_\_\_\_

NAME OF PERSON TO BE BAPTIZED: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
MONTH/DAY/YEAR CITY STATE

FATHER'S NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

MOTHER'S MAIDEN NAME: \_\_\_\_\_  
FIRST MIDDLE MAIDEN NAME

ADDRESS: \_\_\_\_\_  
RESIDENCE ADDRESS  
CITY STATE ZIP

PHONE: (\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Were parents married in the Catholic Church? \_\_\_\_\_ Name of Church \_\_\_\_\_ Date \_\_\_\_\_  
Are you registered with St. Rose Parish? \_\_\_\_\_

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SCHEDULED DATE OF BAPTISM PREPARATION CLASS \_\_\_\_\_

CHURCH WHERE BAPTISM WILL TAKE PLACE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
CITY STATE ZIP

PHONE: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

CONTACT PERSON AT CHURCH OF BAPTISM: \_\_\_\_\_

DATE OF BAPTISM \_\_\_\_\_

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Please bring this completed form with you to the Baptism Preparation class or return to the Parish Office:  
St. Rose Parish, 2825 W. Rose Canyon Circle, Anthem, AZ 85086