

BAPTISM INFORMATION RECORD
HOLY REDEEMER CHURCH
CLARKSVILLE AR

CHILD'S FULL NAME: _____

DATE OF BAPTISM: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

FATHER'S FULL NAME: _____

MOTHER'S FULL MAIDEN NAME: _____

MINISTER: Father William Wewers, osb

GODFATHER: _____

GODMOTHER: _____

LIVING ADDRESS: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

CELL PHONE: _____