



Our Lady of Hope Catholic Church Baptismal Request Form

For questions or concerns, you may call Ashley Cristofaro at the parish office: (703) 433-6770

Fathers Full Legal Name

Mothers Full Legal Name (Maiden Name)

Current Home Address: _____

Contact Phone Number: _____

Current Parish: _____

Have you attended a Baptismal Class? _____ Parish Attended: _____

Baptismal Class Requested: _____ (Every Third Saturday)

Childs Name: _____

Childs DOB: _____

Childs Birth Location: _____

Mothers Religion? _____ Mothers Sacraments: _____

Fathers Religion? _____ Fathers Sacraments: _____

Were the parents married by a Catholic priest? _____ What church? _____

Godfathers Religion / Home Parish: _____

Godmothers Religion / Home Parish: _____

Requested

Baptismal Date _____

Sunday

01:30 pm.

Note: *This document only serves as a request for a Baptism. Only Father Killian / Father Smith have the right to finalize & confirm the baptismal date at Our Lady of Hope. Once confirmed the Parish Administrative Assistant will reach out to you and further go over OLOH Policy.*

X

If Accepted Sign Here
Pastor / Parochial Vicar

Once Signed Return to Parish Admin Assistant