



ST. CHARLES CHURCH
880 TAMARACK AVENUE, SAN CARLOS, CA 94070

CHRISTIAN BAPTISMAL WITNESS
(non-Catholic participant in a Roman Catholic Baptism)

Child's Full Name _____

Father/Legal Guardian Full Name _____

Mother/Legal Guardian Full Name _____

CONFIDENTIAL

CHRISTIAN WITNESS

Name (print) _____

Street Address _____ Phone _____

City _____ State _____

Email _____

As a baptized Christian prepared to serve as a Baptismal Witness, I affirm that I

- am or will be 16 years old at the time of the Baptism.
- am neither the mother or father of the one to be Baptized.
- was not baptized Catholic; nor am I a former Catholic.
- was baptized Christian; baptized with water, *"In the name of the Father, and of the Son and of the Holy Spirit."*

Name of church where I was baptized

Christian denomination _____

City _____ State _____

Therefore, in meeting these criteria, I affirm I am able to stand as a Christian Witness in baptism

Sign here _____
completion online constitutes my signature

Questions? Contact St. Charles Parish at 650-591-7349 or parishoffice@stcharlesparish.org