

Baptism Prep Class Registration

Contact Father Full Name: _____

Contact Mother Full Name: _____

Contact Email Address: _____

Please complete both and Check box for Primary Contact:

Father Cell Phone: _____

Mother Cell Phone: _____

Godparents are welcomed and encouraged to attend the class. If attending, please list names:

Godfather Name: _____ Email: _____

Godmother Name: _____ Email: _____

Month Desired Baptismal Class: _____

Please download and complete this form and send it as an attachment to Kris Michels at kmichels@saintmonicas.com.

We look forward to working with you. Any questions, please call 678-584-9947 X110.

Thank you.