## **CHANCERY**

## DIOCESE OF ROCKVILLE CENTRE

P.O. Box 9023 Rockville Centre, NY 11571-9023 516-678-5800

## **BAPTISM OF A CHILD** OF CATECHETICAL AGE (7-16) INFORMATION FORM

Parish Name:
Town:
Name of Child:
Birthdate of Child:
Name of Parent/Guardian:
Address:
Phone:
Email:
Please describe the reason why Baptism has been delayed and why this request for Baptism, is being made at this time?
Have parents/guardian been participating in the life of a parish?
Yes No
If yes, please provide the name of the parish?

What is the catec	chetical leader's suggested sequence and recommendation for initiation of the child?
	Catechetical/leader's signature/RCIA Coordinator
	Pastor's signature