

Baptismal Catechesis Registration Form Christ the King Catholic Church 4000 Ave Maria Drive, Ann Arbor, Michigan 48105 734-665-5040

All information is confidential. Please print all i	information clearly.
Name of Child (if known): First	MiddleLast
Date of Birth (or Due Date)	City & State of Birth (if applicable)
Name of Mother: First	Middle Maiden
Religion of Mother	Email
Name of Father First M	Middle Last
Religion of Father	Email
Mailing Address:	
Phone Number: Father	Mother
Has your child been previously baptized?	If so, where?
Questi	ions Regarding Catholic Practice
Parish where you are registered	How long?
How often do you attend Sunday Mass?	Mother Father
How often do you go to Confession?	Mother Father
How are you involved in parish life?	
Were you married in the Catholic Church?	Date of Marriage
If not married in the Church, please explain:	
Number of Children Ages	
Are the children enrolled in a Catholic religious	s education program or in a Catholic School?
Is there anything else you would like us to kno	ow or have questions about?
Please sign and return to the Christ the King email the form to pvanicelli@ctkcc.net.	ng Office (4000 Ave Maria Dr., Ann Arbor, MI, 48105) or
Father	Date
Mother	