



Our Lady of Lebanon Maronite Catholic Church
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Email: ourladyol.sf@gmail.com

BAPTISM/CONFIRMATION APPLICATION FORM

Date of Baptism _____ Time _____

Name of Child on Birth Certificate _____

Name of Confirmation (Choose a Saint's Name) _____

Place of Birth: City _____ State _____

Date of Birth _____

Father's Name _____

Father's Religion:

- Maronite Rite
- Roman Rite
- Other _____

Mother's Name _____

Mother's Religion

- Maronite Rite
- Roman Rite
- Other _____

Godfather's Name _____

Godfather's Religion

- Maronite Rite
- Roman Rite
- Other _____

Godmother's Name _____

Godmother's Religion

- Maronite Rite
- Roman Rite
- Other

Parent's Telephone Number _____

Parent's Address _____ Zip Code _____

Parent's Email Address _____

Priest's Name _____

Notes and Remarks on Baptism _____

Church Donation: _____