

**Queen of Peace Church**  
2550 Millville Avenue Hamilton, Ohio 45013  
513-863-4344 Fax 513-863-4364 [parishoffice@gpchurch.org](mailto:parishoffice@gpchurch.org)

<b>Office Use Only</b>
Date _____
Time _____
Celebrant _____
Pews _____

**BAPTISM INFORMATION**  
(ensure proper spelling for certificate)

Child's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

City/State of Birth \_\_\_\_\_

Father's Full Name \_\_\_\_\_ (Catholic) Y / N

Mother's Full Name \_\_\_\_\_ (Catholic) Y / N

Mother's Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

Godfather Name \_\_\_\_\_ (Catholic)

Godmother Name \_\_\_\_\_ (Catholic)

Christian Witness Name \_\_\_\_\_ (non-Catholic)

(Please submit a form for each Godparent and /or Christian Witness prior to the Baptismal date.  
There needs to be at least one active practicing Catholic Godparent)

Date of Preparation Class \_\_\_\_\_

Date of Information \_\_\_\_\_

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Call the parish office 863-4344 to schedule a baptism

**Date of Baptism** \_\_\_\_\_

**Celebrant** \_\_\_\_\_

**Baptism Preparation Class**

- 2nd Monday of the month 7:00pm-8:30pm
- Located in McCarthy Hall
- Contact **Shelly Glasshagel 513-300-8574**