

St. Sharbel Maronite Catholic Church

Portland, Oregon Baptism and Chrismation (Confirmation) Information

Dear Parents,

Please provide the following information. I will produce an official certificate based on the information you provide and mail it you. Thank you for helping us to maintain the Church Register.

God bless,

Nadia Redmond, CRE Register Secretary for St. Sharbel Parish 503-671-0440 n.redmond@comcast.net

Surname First Name_____Middle Name____ (Chrismation is done for families of Eastern Catholic Rites) Date of Birth _____ City & State of Birth_____ Date of Baptism______ by Rev. Christopher Fabre_____ Father's Full Name _____ Father's Rite: ☐ Maronite ☐ Roman ☐ Melkite ☐ Byzantine ☐ other, specify Mother's Full & Maiden Name Mother's Rite: ☐ Maronite ☐ Roman ☐ Melkite ☐ Byzantine ☐ other, specify _____ Sponsor Full Names (Godparents – at least one must be a practicing Catholic) Godfather _____ Godmother Phone Number _____ Email (optional) Mailing Address - where you want the official signed and sealed certificate mailed to: