



Office Use Only

Date of Baptism:

Time: Place:

Appointment Date: Time: Workshop Date:

Fee Paid: Date..... Receipt no: Copy of Birth Certificate on file

BAPTISM DETAILS FORM

Name of Candidate (In Full)..... BOY GIRL

Date of Birth: **Place of Birth:**

Mother's Name (In Full)..... **Religion**.....

Mother's Maiden Name (Surname).....

Father's Name (In Full)..... **Religion**

Address

.....

Telephone No

Email address

Please note: Godparents need to be over 16 years old.

Godfather's Name 1) **Religion**

Baptism Certificate Provided

2) **Religion**

Baptism Certificate Provided

Godmother's Name 1)..... **Religion**

Baptism Certificate Provided

2)..... **Religion**

Baptism Certificate Provided

Christian Witnesses 1)..... 2).....

FAMILY LAW MATTERS

By applying for the Baptism of this Child, you are confirming that you are acting within your legal rights, as the parent or guardian of this child to have the child Baptised. *tick* YES or NO

Are there any Court Orders? *tick* YES or NO

Has a copy of every such Order been attached to this Enrolment Form? *tick* YES or NO

Mother's Signature..... **Father's Signature**.....

Do you consent to the publication of your child's name in our Weekly Newsletter on the weekend of the Baptism? *tick* YES or NO

PRIVACY STATEMENT: "We are committed to protecting your privacy. The information you provide to our Parish may be used for a variety of purposes including the provision of pastoral services, maintaining and developing our Parish infrastructure, and communicating with you on what is happening within our Parish Community."