

REQUEST FOR BAPTISM

Full name of candidate:	
Date of birth:	Age at Baptism:
Title & Full name of fathe	er:
Father's occupation:	
Title & Full name of moth	ner:
Mother's occupation:	
Names of siblings	
Address:	
Telephone number:	e-mail
Godparents' <u>full</u> names:	1
	2
	3
	4

Do you give permission for the church to hold your personal details for the sole purpose of communicating with you regarding church services and activities? Yes/No

Date of Baptism:

Please return this form to the Parish Office (address above) as soon as possible. It serves as confirmation of your chosen date. (Godparents' names may be added later)

