

Baptism Request and Consent Form

Baptism is the introduction of a person into the Church community. Through the waters of Baptism a person enters into the life of God - Father, Son and Holy Spirit.

.....
PARISH NAME

.....
DATE & TIME OF BAPTISM

.....
PLACE OF BAPTISM

Please provide a copy of the child's birth certificate

CHILD'S DETAILS

Surname		
Christian Names		
Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Place of Birth		

MOTHER'S DETAILS

Full Name		
Maiden Name		
Religion		
Contact	Mobile:	Email:
	Address:	

FATHER'S DETAILS

Full Name		
Religion		
Contact	Mobile:	Email:
	Address:	



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Our Lady Help of Christians, Ardlethan
Catholic Archdiocese of Canberra & Goulburn

*At least one Godparent must be a baptised & confirmed Catholic over the age of 16.
Godparents baptised in another denomination are a Christian Witness*

GODPARENTS	
Declaration of Godparents	I/We will assist the parents in their efforts to share the Catholic faith and set an example of Christian living and help the child grow in faith & virtue.
1. Name	Religion:
Signature:	
2. Name	Religion:
Signature:	

BAPTISM PREPARATION	
Baptism Preparation Date:	Presentation Mass Date:

As parents and first teachers of our child, we declare that we accept the responsibility of preparing him/her in the practice of the Catholic faith.

PARENT DECLARATION	
Mother Signature	
Father Signature	

Would you like to receive the weekly parish bulletin via email?: Yes No N/A

DONATION	
Account Name	
BSB	062-786
Account No.	
Reference	

Office use only

Celebrating Clergy	
PACS Register Folio No.	
Offering received via	<input type="checkbox"/> Cash <input type="checkbox"/> Bank Deposit <input type="checkbox"/> Credit Card <input type="checkbox"/> Qkr!
Date Banked	



Catholic Archdiocese of Canberra & Goulburn

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