BAPTISM REQUEST FORM

Parish St Mary's Parish, Crookwell **Baptism Details**



Surname:									
Christian na	s:								
Date of birth:			Gend	der:	Male	Female			
Place of birth:									
Address:									
Phone no:			Em	ail:					
Mother's full name:									
Phone no:			Em	ail:					
Mother's maiden name:									
Religion of mother:									
Father's full name:									
Phone no:			Em	ail:					
Religion of father:									
Place and date of parents' marriage (church, denomination, etc.):									
Names of <u>Catholic</u> Godparents:									
Names of non-Catholic Christian witnesses & Religion:									
Enrolment Evening- date:									
Presentation (Mass to attend beforehand) -date:									
Baptism is booked in for: Date:									
Church:									
Time:									

- Baptism Preparation will need to be undertaken.
- Unless provided things to bring on baptism day candle, white garment, offering envelope.

REQUEST FOR BAPTISM

We request t	the Sacrament of Ba	ptism for our o	child		
	and that Baptism is a sour child a member		-		to our child and
3.	Reconciliation, Co	ty of bringing of s, by loving Go e need to tead to tead to present the need to present and	our child up to od and our neig ch our child by er and remain f epare our child Confirmation.	keep God's ghbour. the example faithful to the for the othe	Commandments e of true Catholic e attendance of
W	e pray that God will	keep us faithf	ul to our obliga	ations.	
SIGNED		AND			
NON CATHO	OLIC PARENTS (if I	necessary)			
	unable to profess mone Catholic Church, of God.	•			·
SIGNED					
	DEC	LARATION B	Y GODPAREI	<u>VTS</u>	
	and				
-	nts for this child. We Christian living, and h		-		larly for, and set an
SIGN	IED	and			
am not a Cat	WITNESS. While sh tholic. I will strive to a vice of God and Mar	assist the pare	•		• •
SIGNED					
					. W.

THE CHILD MUST HAVE A CATHOLIC GODPARENT.