St Christopher's Cathedral Parish

Cnr. Canberra Ave & Furneaux St, Forrest ACT 2603 (incorporating St Peter Chanel's Church, Cnr Weston & Loch St, Yarralumla) Parish Office: 55 Franklin Street, Forrest ACT 2603. Tel: +61 (02) 6239 9846

Email: cathedral@cg.org.au www.cg.org.au/cathedral



Baptism Registration and Consent Form

DECLARATION BY THE PARENTS:

We ask to have our child baptised into the family of God, the Church. As the first teachers of our child, we accept the responsibility of training him/her in the ways of life and faith. In time we will present our child to celebrate the other Sacraments of Christian Initiation, Holy Communion (preceded by Reconciliation) and Confirmation. We will do so consistent with our desire for our child to mature as a follower of Jesus. We understand that the witness of our beliefs and values are integral to the healthy development of our child.

Signed: FATHER:	MOTHER:	
The following details are required	(please print clearly):	
Given name/s of person to be bap	tised	
Surname of person to be baptised		
Date of birth	Place of birth	
Father's full name		Religion
Mother's full name		Religion
Mother's maiden name		
Residential address		
Suburb		Post code:
Contact number:	Email:	
Place & Date of parents' marriage	(if applicable)	
(please tick) Catholic Church An	other Church Another F	lace Never
Which parish do you now attend? (please tick) Regularly	Occasionally Nev	er at present
Date of Baptism		
Date attending Baptism Preparation St Christopher's Baptismal Preparation Sessions Pastoral Centre, 55 Franklin Street, Forrest.	on Session	

Parish where Preparation Session took place (if not at St Christopher's)

GODPARENTS AND/OR 'CHRISTIAN WITNESSES' DECLARATION

NB: At least one Godparent or Sponsor must be a Catholic.

A person of another Christian tradition is a 'Christian Witness', though they participate in the Rite of Baptism as a Godparent.

Custom is that there be no more than two Godparents or a Godparent and a Christian Witness.

DECLARATION BY CATHOLIC GODPARENT/S

We will/I will assist the pare living with this child. We are devotion to Christ's way, the	ent/s in their efforts to select am baptised in the Corough prayer, the recep	ptism of Share the Catholic faith and a joy for Catholic Church. We/I understand that tion of the sacraments, and the living I am to fulfil our role/my role as
Signed:		
(PLEASE PRINT NA	 ME)	(PLEASE PRINT NAME)
DECLARATION BY A NON-CA	ATHOLIC (for other Chr	istians)
We are/I am privileged to be		•
Sharing the same Baptism ir can to assist the parent/s in	, ,	loly Spirit, we/I will strive to do all we/I he love of God and others.
Signed:	Relig	on
(PLEASE PRINT N	 AME)	

A suggested Church Offering of \$100 can be made at the Parish Office on the return of the completed form. This Offering is for the stole fee for the Priest, the certificate, white Baptismal Bib and a regular baptismal candle.

The Offering payment can be made either by online payments: https://www.bpoint.com.au/payments/sccp, Direct Bank Transfer, credit card payment either in person at this office, cash or cheque (made out to St Christopher's Parish). If you would like to do a bank transfer, our banking details are as follows:

Account Name: St Christopher's Cathedral

BSB Number: 062786 Account Number: 15080

Bank: Commonwealth, Manuka

Please put in your banking reference your surname/'baptism'/date of baptism (eg: Jones baptism 4.8.18). Please email a copy of the banking receipt to this office so your payment can be recorded.