

BAPTISM REQUEST FOR FAMILIES

Name of child/ren, including middle name(s):

..... DOB: AGE:
..... DOB: AGE:
..... DOB: AGE:

Address:

Phone Number:

Email Address:

Name of Father:

Catholic or Religious Faith:

Baptised:

Name of Mother (inc Maiden Name):

Catholic or Religious Faith:

Baptised:

Sibling: DOB: Baptised: School:

Sibling: DOB: Baptised: School:

Sibling: DOB: Baptised: School:

Child 1 Godparents/Sponsors:

Child 2 Godparents/Sponsors:

Child 3 Godparents/Sponsors:

(at least one Godparent must be over the age of 16, Catholic, received their Sacraments and/or baptised)