



Baptism Booking Form

Please tick one box:

- New Parishioner
 Existing Parishioner

CHILD BEING BAPTISED

SURNAME		FULL CHRISTIAN NAME	
DOB		PLACE OF BIRTH	

PARENTS DETAILS

FATHER		MOTHER	
SURNAME		SURNAME	
		MAIDEN NAME	
FULL CHRISTIAN NAME		FULL CHRISTIAN NAME	
DOB		DOB	
RELIGION		RELIGION	
DATE AND PLACE OF MARRIAGE		Baptism Certificate of Parent/s Attached?	YES / NO

FAMILY DETAILS

ADDRESS			
MOBILE		EMAIL	

OTHER CHILDREN IN THE FAMILY

NAME		DOB	
NAME		DOB	
NAME		DOB	

GODPARENTS (THERE MUST BE AT LEAST ONE CATHOLIC GODPARENT)

NAME		RELIGION	
NAME		RELIGION	

Please indicate suggested date and where you would like the baptism to be celebrated:

Suggested Date: _____ Holy Family Church, Lindfield Immaculate Heart of Mary, Killara

I give permission for the Parish school to contact me when my child is approaching school age.

The information provided is collected and handled in accordance with the Catholic Diocese of Broken Bay's Privacy Policy available on the Diocese and Parish websites.

*We are a welcoming Christian community which embraces all people.
We support each other to grow in faith and create a loving and compassionate community.
We aspire to live as Christ's witnesses of God's unconditional love.*

OFFICE USE:

Date & Time of baptism: *Church:*

Celebrant: *Certificate issued:* **Yes / No**

Entered in PACS: *Entered in Register:*