St. John the Evangelist Church, Ballinteer REQUEST FOR BAPTISM (Copy of Civil Birth Certificate should accompany this Form)



Child's Surname:		
Child's Christian Name(s):		
Date of Birth:		
Address of Parents:		
Phone number: M		
Date and place of Church Marriage of Parer	nts:	
Signature of Father	Signature of Mother	
<u>Father</u>	<u>Mother</u>	
Surname:	Maiden Name:	
Christian Name:	Christian Name:	
Religion: †	Religion: †	
Godfather*	Godmother*	
Name:	Name:	
Is he over sixteen years?	Is she over sixteen years?	
Is he a baptised Catholic who has	Is she a baptised Catholic who has	
been confirmed?	been confirmed?	
† One of the parents must be a Catholic * Minimum requirement is one Godparent. If there are two they must be male and female and must both be practising Catholics. ** Signature of mother alone is sufficient where she is unmarried, is sole guardian and is not requesting that the father's name be entered. *** A donation towards the upkeep and maintenance of the church would be appreciated.		
Date of Baptism:	Official: Birth Certificate Presented	
Date attending Preparation Meeting:	Signed:	
For Parish Use Only Sacrament administered by me and details recorded in the Parish Register of Baptisms On: Signed:		

Consent

As part of welcoming the newly baptised into our partlike your permission to do the following:	ish community we would
Publish his/her name in the parish newsletter which church and on our parish website	will be available in the
To let you know about future events/celebrations tak	ring place in our Parish
Signature	Date

The information contained in this Form will be used to register this Baptism in the Parish. The Copy of the Birth Certificate you submitted will be destroyed once the Baptism is registered. The information entered in the Baptism Register will be retained permanently.