

St Joseph's Parish Enfield
 126 Liverpool Rd.,
 Enfield, NSW 2136

APPLICATION FOR THE SACRAMENT OF BAPTISM



Preferred Date of Baptism	
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<i>Date Confirmed by PP</i>	Y/N
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Child Last Name		
Child Other Names		
Date of Birth		Male/Female
Place of Birth (city & state)		

Address			
Mother's Full Name			
Maiden name (if different)		Religion	
Phone		email	

Father's Full Name			
phone		Religion	
email			

Date of Parent's marriage			
Church (if not married in a Church, please state place)			

Godfather/mother:		Religion	Catholic	(all godparents must be baptised Christian & at least one must be Catholic)
Godfather/mother:		Religion		

Celebrant:			
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Pre-baptism course date:	
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office use only
 PACS
 Register
