



Our Lady Star of the Sea Baptismal Request Form

PLEASE PRINT CLEARLY

Date of Baptism _____ Telephone _____

Candidate's Surname _____

Candidate's Christian Name(s) _____

Candidate's Date of Birth _____ Place of Birth _____

Candidate's Address _____

Father's Full Name _____

Father's Religion _____

Mother's Christian and Maiden Name _____

Mother's Religion _____

Church where parents were married _____

Godparent's Name _____ Religion _____

Godparent's Name _____ Religion _____

There are **two** Godparents, one male, one female. At least one of these must be a practising Catholic who has been baptised, confirmed and received Holy Communion and is over the age of sixteen. The other Godparent must be baptised.

I/we have participated in the Baptismal preparation program on
Date we attended _____ (1st Friday of the month 7.00pm).

and request Baptism for _____

(signed) _____ Catechist _____

IT IS CUSTOMARY TO MAKE A SMALL DONATION FOR THIS SERVICE
Office use only: Baptismal Register noted _____ Family File noted _____

Parish priest notified _____

Celebrant at Baptism _____