

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: (*copy birth Certificate to be attached*) _____

FATHER: Surname: _____ Christian Name: _____

MOTHER: Surname: _____ Christian Name: _____
(*Maiden Name*)

Address of Parents: _____

Phone Number: (H) _____ **Mobile No. :** _____

Date and place of Church Marriage of Parents: _____

We request Baptism for our Child:

Signature of Father**

Signature of Mother**

<p>GODFATHER* Name: _____ Is a Practising Catholic? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>His Address: _____</p> <p>GODMOTHER: * Name: _____ Is a Practising Catholic? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Her Address: _____</p>

* Minimum requirement is one Godparent. If there are two they must be male and female.

** Signature of Mother alone suffices 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: _____

Date attending Preparation Meeting: _____

For Parish Use Only

Sacrament administered by me and details recorded in the Parish Register of Baptisms

On: _____

Signed: _____