



# Our Lady of Mt Carmel Catholic Parish, Mt Pritchard

## BAPTISM REQUEST FORM

### CHILD'S DETAILS

Title— Master/ Miss	Date of Birth:	Place of Birth:
Child's Surname		
Child's Christian Names		
Family Address	<b>Essential Requirements prior to Baptism:</b>	

### FATHER'S DETAILS

Christian and Surname		
Religion:	Phone No:	Email:

### MOTHER'S DETAILS

Christian and Surname		Maiden Name:
Religion:	Phone No:	Email:

### GODPARENTS FOR YOUR CHILD—Must be a practising Catholic, confirmed and aged 16 years or over

Full name		Religion:
Full name		Religion:
Full name		Religion:
Full name		Religion:

### Father's Signature

### Mother's Signature

Signature		Signature	
Name		Name	
Date of Baptism:		Celebrant's Name	

- \* Copy of child's Birth certificate.
- \* If parents live outside OLMC Parish boundary, permission letter from Parish Priest of their parish.

**OFFICE USE ONLY**

**Register ##**