St. Raphael's Catholic Church

Details required for the Sacrament of Baptism

PLEASE PRINT IN BLOCK CAPTITALS

Agreed date for Baptism (Please leave blank) __ /__ / ____time ____

Contact Name _____
Tel. Number _____
Email _____

Details about the child

Surname _____
Christian Name _____
Date of Birth __ / __ /____ Boy or Girl_____
D D M M YEAR

Details about the child's mother

Surname _____
Maiden Name _____
Christian name _____
Address _____
_____
Religion _____
Place of marriage _____
Date of marriage _____

Details about the child's father

Surname _____
Christian name _____
Address _____
_____
Religion _____

Continued Over

Details of the child's God Parents
(Maximum of 2 who must be must be practicing Catholics)

Surname _
Christian name _
Religion _

Surname _
Christian name _
Religion _

On the day please bring the following

1 –A white Garment

2-A Baptismal Candle (These may be purchased from the Church Repository in Alexander House after Sunday Mass)

3- It is customary to make a offering to the parish on the occasion of your child's Baptism. Please bring the enclosed envelope with you on the day and give it to the minister.

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St. Raphael's Parish Office use

Booked to attend Baptism Course _ _ / _ _ / 20_ _

Attended Course Yes / No

Baptism performed By _ _ _ _ _ _ _ _