

Request Form for Baptism

Date of Baptism: Day _____ Month _____ Year _____

Child's name

(FIRST Name) (MIDDLE Name) (LAST Name)

_____/_____/_____
(Date of Birth) (City of Birth) (State of Birth)

Father's name

_____/_____
(FIRST Name) (MIDDLE Name) (LAST Name) (Religion)

Mother's name

_____/_____
(FIRST Name) (MIDDLE Name) (LAST Name) (Religion)

Your Address _____

_____ Tel. number _____

Marriage in Catholic Church Yes No / Place _____ / Year _____

Godmother's name (**Have to be catholic **)

(FIRST Name) (MIDDLE Name) (LAST Name)

Godfather's name (**Have to be catholic **)

(FIRST Name) (MIDDLE Name) (LAST Name)

Note: The Rite of Baptism is conducted every second Sunday of the month after 10.00 A.M. English Mass. Please submit this form to the church office at least two week before the Rite is conducted.

Additional items required: a copy of Birth Certificate and a copy of Marriage Certificate