



## Catholic Parishes of St. Anne's Bondi Beach and St. Patrick's Bondi

### BAPTISM APPLICATION FORM

Child's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Family Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Parish of Worship: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

## **GODPARENTS**

There are to be two Godparents, one male and one female, who should be at least 16 years of age and should be fully initiated into the Catholic Church, that is, they have received the Sacraments of Baptism, Eucharist, and Confirmation.

Name of Godfather \_\_\_\_\_

Name of Godmother \_\_\_\_\_

Proposed date of baptism: \_\_\_\_\_

In asking to have my child baptised, I acknowledge my responsibility for the education of my child in the faith. With God's help, I promise to carry out that responsibility through both word and example.

Signature of Parents: \_\_\_\_\_