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## **BAPTISM APPLICATION FORM**

## **DETAILS OF CANDIDATE**

Surname					
Given Na	mes				
Date of Birth			Mother's Maiden Name		
Place of Birth			Male/Female		
FATHER OF CHILD MOTHER OF CHILD					
Name					
Address					
Contact N	No				
Email					
Religion					
If Christian, ba	If Christian, baptised?				
BAPTISMAL COMMITMENT  ✓ We accept the responsibility to bring up our child in the practice of our Catholic faith.  ✓ We accept that it is our duty to bring up our child to keep God's commandments as Jesus taught us by loving both God and neighbour.  ✓ One or both of us will attend a baptismal preparation meeting (held on the first Thursday of every month at 6pm).  By typing or signing your name in the space provided you indicate acceptance:  Father  • Mother  DETAILS OF CEREMONY  CHURCH CELEBRANT					
DATE		СПОКСП		CELEBRAINI	
DETAILS OF GODPARENTS/CHRISTIAN WITNESS					
Full Names					Religion
DATE APPLICATION RECEIVED: BOOKING CONFIRMED:					STAFF:
DATE OR BAPTISM PREPARATION:					ATTENDED: YES/NO
BAPTISM REGISTERED   MEMBERSHIP UPDATED DATE:					STAFF: