

THE CATHOLIC PARISH OF CORINDA GRACEVILLE ~ BAPTISMAL ENROLMENT FORM

Please attach a copy of your child's Birth Certificate

Baptismal Candidate:

Candidate's Full Name:Sex: male / female

Date of Birth: Place of Birth:

Candidate's Parents:

Father's Surname: Given Names:

Father's Religion:

Mother's Surname: Given Names:

Mother's Religion: Mother's Maiden Surname:

Contact Details:

Parent's Address:

Father's Mobile: Mother's Mobile:

Father's Email:

Mother's Email:

Candidate's Godparents:

Godparent: (full name)..... Religion

Godparent: (full name)..... Religion:

Godparent: (full name)..... Religion:

Godparent: (full name)..... Religion:

FAMILY LAW MATTERS and CONSENT

A copy of any Court Orders concerning residence arrangements for the candidate, time spent by the Candidate with either parent, or parenting issues must be supplied with this enrolment form.

Are there any such orders? **YES / NO**

Has a copy of every such order been attached to this enrolment form? **YES / NO**

I hereby give my consent for the Candidate to be baptised in the Roman Catholic Faith, and for the abovenamed Godparents to be the Godparents for the Candidate.

Father's Signature: Date:

Mother's Signature: Date:

What do you ask of God's Church for your child?

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Date of Baptism: **Time of Baptism: 11.00am** **Church:**

Priest:

We are committed to protecting the privacy of your information. The information you provide may be used for a variety of purposes including the provision of pastoral services, maintaining and developing our Parish infrastructure and communication with you on when is happening within our Parish community. A copy of our full Privacy Statement is available by contacting the Parish Office on 3362 8777.