



St Anne's Catholic Church

84 Austin Road, Seaford, VIC 3198

Ph:(03) 9401 6398 E: Seaford@cam.org.au

Baptism Application Form

Please print in clear, distinct letters.

Please carefully check the information and spelling of names and dates as this information is recorded on the Baptismal Certificate and in the Baptism Register.

Full Name of the Child	
Surname	
Date of Birth	Gender: Male / Female
Place of Birth	
Proposed Date of Baptism	Time:

Baptisms are celebrated at 11:30am on the 2nd Sunday of the month

Confirmation letter will be sent to you once we have received this form

You are required to attend a baptism preparation session in the morning of the 1st Saturday of the month in the Community Hall at 10 am prior to the baptism of your child. Families from other parish needs to obtain a permission letter to have their child baptised at St Anne's.

PARENTS

Father's Full Name	
Religion	Contact No:
Mother's Full Maiden Name	
Religion	Contact No:

PRIMARY CONTACT

Name of Contact Person	
Residential Address	
Telephone/ Email	

Godparents should be a Male and a Female
At least one of the Godparents must be baptised and Confirmed in the Roman Catholic Church (should be over the age of 16)

GODPARENTS

Full Name Godparent (one)	
Religion	
Full Name Godparent (two)	
Religion	

Baptism Commitment

- I/We accept the responsibility to bring my/our child up in the practice of the Catholic Faith
- I/We accept that it is our duty to bring him/her up to keep God’s Commandments as Christ taught us by loving God and loving our neighbour.
- I/We will accept this commitment to my/our child’s Catholic upbringing.

<i>Father’s Signature</i>	<i>Mother’s Signature</i>
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Confidential

All information supplied will be handled in accordance with the privacy of the Catholic Archdiocese of Melbourne

Office use only

<i>Confirmation Letter</i>	
<i>Preparation evening</i>	
<i>PACS</i>	
<i>Register</i>	
<i>Certificate</i>	