

Date of Baptism:

Request to Baptize an Infant or a Child

(office use only)

Date of this Request: _____

Return this form to the Ministry Centre with:

- a copy of your child's birth certificate
- an *Affirmation of Faith* for each Roman Catholic godparent.

We need to receive all documents before we can schedule a baptism.

Registered in Parish? Yes No Envelope Number: _____

Infant/Child

Surname: _____

Given names: _____

Female Male

Date of Birth: _____

City of Birth: _____

Birth certificate attached

Parents

Father: First name _____

Last name: _____

Father's Religion: _____

Mother: First name _____

Maiden name: _____

Mother's Religion: _____

Address: _____

City: _____

Postal Code: _____

Telephone: _____

Marriage

Name and Address of Church of Marriage: _____

Not married in the Catholic Church

Sponsors

- *Only one godparent is necessary.*
- *A godparent must be at least 16 years of age, have celebrated the Sacrament of Confirmation and be a **practising** Roman Catholic.*
- *If you only have one godparent, a baptized and practising member of another Christian religion may act as a Christian witness.*

Godparent Name: _____

Religion: _____

Godparent / Witness Name: _____

Religion: _____

Affirmation of Faith for each Roman Catholic godparent attached

Celebrant's signature: _____