



OFFICE USE ONLY Register No. / Entered: Register PACS Date: Notification Sent:

BAPTISM APPLICATION FORM

CHILD'S FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

SUBURB: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

FATHER'S GIVEN NAME: \_\_\_\_\_

FATHER'S SURNAME: \_\_\_\_\_ RELIGION: \_\_\_\_\_

MOTHER'S GIVEN NAME: \_\_\_\_\_

MOTHER'S MAIDEN SURNAME: \_\_\_\_\_ RELIGION: \_\_\_\_\_

DATE & PLACE OF MARRIAGE: \_\_\_\_\_

PROPOSED DATE OF BAPTISM: \_\_\_\_\_

PROPOSED TIME: 1.00pm 2.00pm 3.00pm Other: \_\_\_\_\_

NAME OF PRIEST OR DEACON: \_\_\_\_\_

CONTACT DETAILS OF PRIEST OR DEACON: \_\_\_\_\_ (Phone and Email)

GODPARENT'S NAME: \_\_\_\_\_ RELIGION: \_\_\_\_\_

GODPARENT'S NAME: \_\_\_\_\_ RELIGION: \_\_\_\_\_

This form must be completed, signed and returned to the Special Liturgies Officer

## TERMS AND CONDITIONS

I/We agree that the above information is correct and wish to apply for the Sacrament of Baptism for our child in St Mary's Cathedral.

I/We have read the guidelines for Baptism as specified by St Mary's Cathedral and agree to adhere to them.

*We require the signature of at least one parent*

SIGNED: \_\_\_\_\_

RELATIONSHIP TO CHILD: \_\_\_\_\_

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

---

## CHECKLIST

*The following documents must be attached/presented prior to your application being approved.*

- Baptism Application Form
- Priest Acceptance Letter
- Permission Letter from your local Parish  
(if outside of the Cathedral parish boundary)