

St. Clement with St. Peter, Dulwich

# Application for Baptism

Child's Christian name: \_\_\_\_\_ Surname: \_\_\_\_\_

Child's date of birth \_\_\_\_\_ Proposed date of Baptism \_\_\_\_\_

Father's Christian name(s) and Surname \_\_\_\_\_

Have you been baptised? Yes / No Confirmed? Yes / No

Mother's Christian name(s) and Surname \_\_\_\_\_

Have you been baptised? Yes / No Confirmed? Yes / No

Home Address : \_\_\_\_\_

Postcode : \_\_\_\_\_

Contact Numbers : Home \_\_\_\_\_ Mobile \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

Parent's Occupation - Father : \_\_\_\_\_

Parent's Occupation - Mother : \_\_\_\_\_

Names of Godparents (*maximum of 5*) - Christian name(s) & Surname

*Please tick the boxes to answer "yes" to whether the person is baptised or confirmed.*

1. \_\_\_\_\_ Baptised  Confirmed
2. \_\_\_\_\_ Baptised  Confirmed
3. \_\_\_\_\_ Baptised  Confirmed
4. \_\_\_\_\_ Baptised  Confirmed
5. \_\_\_\_\_ Baptised  Confirmed

For Office use only  Confirmed date of Baptism : \_\_\_\_\_ 12 Noon

Home Contact made

Form copied and given to Parish Administrator

Baptism Register Number : \_\_\_\_\_

Officiating Minister : \_\_\_\_\_