St. John the Baptist R.C. Church, Annitsford

ROMAN CATHOLIC DIOCESE OF HEXHAM & NEWCASTLE

SACRAMENT OF BAPTISM REQUEST FORM

Candidate's Name ……
Candidate's Date of Birth ……
Proposed Baptismal Date ……

Mother's Name …… Baptised Catholic Y/N
Mother's Maiden Name ……
Father's Name …… Baptised Catholic Y/N
Family Address ……
……
……
Post Code ……
Home Phone Number (see Note 1) ……
Mobile Number (s) (see Note 1) ……
Email address (see Note 1) ……

Godfather (s) …….. Catholic Y / N
Godfather (s) …….. Catholic Y / N
Godfather (s) …….. Catholic Y / N
Godfather (s …….. Catholic Y / N)
Godmother (s) …….. Catholic Y / N
Godmother (s) …….. Catholic Y / N
Godmother (s) …….. Catholic Y / N
Godmother (s) …….. Catholic Y / N

I / we agree that I / we will attend the Baptism Preparation Course Meetings **and to attend weekly Mass.**

Signed …….. (Parent / Guardian) Date ……..
Signed …….. (Parent / Guardian) Date ……..

IMPORTANT

Please note that one of the Godparents **MUST** be a practicing Catholic. All Godparents will be recorded on the Baptismal Certificate but only two will be recorded in the Church's Baptism Record Book. Please state which two you wish to be recorded. Please complete the Form fully and return to Fr. Manoj Joseph either personally or to the postal address or email address shown below.

NOTE 1: Contacts - where possible please supply all three contact details: if not, supply at least one; if more than one mobile number that should be contacted, please supply all numbers.

Office Record:

Request received ……
Parents contacted. ……..……..…..
Baptism Preparation Date. ……
Certificate issued ……
Baptism Register updated ……

https://.stjohnbaptist-rc.uk
pp.stjohn.annitsford@diocesehn.org.uk

01670 712476

Address
St. John the Baptist's Parish Church
Annitsford, NE23 7QR