St Kieran’s Parish – Baptism Form

**CHILD TO BE BAPTISED**

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|  | Proposed Date: | Time: |
| Celebrant: |
| Christian Name: | Middle Name: | Surname: |
| Place of Birth: |
| D.O.B: |
| Home Address: |
| Phone: |
| Email: |
| **FAMILY** |
| Father’s Full Name: |
| Father’s Religion: |
| Mother’s Full Name: |
| Mother’s Maiden Name: |
| Mother’s Religion: |
| Godparent’s Name: |
| Godparent’s Religion: |
| Godparent’s Name: |
| Godparent’s Religion: |

DATE: / / SIGNATURE: