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: