

Baptismal Enrolment Form

Please forward this form, along with \$150.00 booking fee to:

St Thomas Aquinas Catholic Church - 87 Central Avenue, St Lucia, QLD, 4067

Email: stlucia@bne.catholic.net.au - ACC NAME: 2nd Collection BSB: 064786 ACC: 100029235.

Unfortunately, we cannot complete a booking if the bottom of this form isn't signed.

Baptismal Candidate:

Candidate's Full Name: _____ Sex(Circle): Male/Female

Date of Birth: _____ Place of Birth: _____

Present Address: _____

Parents Home Ph: _____ or Work Ph: _____

or Mobile Ph: _____ or Email: _____

Candidate's Parents:

Father:

Family Name: _____ Given Names: _____

Religion: _____ Occupation: _____

Mother:

Maiden Name: _____ Given Names: _____

Religion: _____ Occupation: _____

Candidate's Godparents:

Godparent (Full Name): _____ Religion: _____

Godparent (Full Name): _____ Religion: _____

Godparent (Full Name): _____ Religion: _____

Godparent (Full Name): _____ Religion: _____

Details of the Day:

Date of Baptism(preferred): _____ Celebrant (if known): _____

FAMILY LAW MATTERS

A copy of any Court Orders concerning residence arrangements for the candidate, time spent by the Candidate with either parent, or parenting issues must be supplied with this enrolment form.

Are there any such orders? (Circle): Yes/No

Has a copy of every such order been attached to this enrolment form (Circle if Applicable): Yes/No

I hereby give my consent for the candidate to be baptised in the Roman Catholic Faith, and for the above named God parents to be the godparents for the Candidate.

Father's Signature: _____ Mother's Signature: _____

Date: _____ Date: _____