

**Star of the Sea Marlborough**  
**Request for Infant/Child Baptism**

We, the parents of .....  
request that our child receive the Sacrament of Baptism, and begin  
the process of Christian Initiation into the Catholic Community.

We understand that the Baptism of our child is the first step in a  
lifetime of faith, and that in due time our child will mature through  
reception of the Sacraments Confirmation & First Communion.

**(Please Print)**

**Child**

Family Name .....

Christian Name(s) .....

Date of Birth .....

Place of Birth .....

Age Now .....

Address .....

..... Post Code .....

Phone .....

E-mail .....

Parish of Residence: .....

If you live locally and are not already on the Parish roll, would you like  
to be? Yes/No

**Parents:** Please attach a Baptism Certificate of at least one  
Catholic parent

Father's Name.....

Religion .....

Mother's **Full Maiden Name**.....

Religion .....

Place of Marriage.....

**GODPARENTS (NB: Both Godparents must be Baptised  
Christians, and at least one should be a practising Catholic).**

God-parent's name .....

Religion .....

God-parent's name .....

Religion .....

**SIGNATURES OF PARENTS**

Father.....

Mother.....

**Booking Details:**

Baptism Date: ..... Time .....

Church of Baptism .....

Preparation Date: .....

Rite of Presentation at Mass: .....

Priest presiding: .....

**DONATION** (to be given to the priest at the baptism)