



St John The Evangelist Parish Riverstone

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BAPTISM FORM

PLEASE PRINT CLEARLY – COMPLETE ALL RELEVANT INFORMATION

CHILD'S INFORMATION		
Note: Child's name as it appears on the Birth Certificate, please attach a copy of the Birth Certificate.		
FIRST NAME	MIDDLE NAME	
SURNAME	AGE	GENDER
DATE OF BIRTH	PLACE OF BIRTH	

PARENT INFORMATION	
Note: The child needs at least one Catholic parent who is Baptised in the Catholic Faith. Attach a copy of your baptism certificate.	
MOTHER'S FIRST NAME	SURNAME
RELIGION	MAIDEN NAME
HOME ADDRESS	
EMAIL ADDRESS	
PHONE NUMBER	

FATHER'S FIRST NAME	SURNAME
RELIGION	
HOME ADDRESS	
EMAIL ADDRESS	
PHONE NUMBER	

TYPE OF BAPTISM Please tick one		DATE OF BAPTISM
IMMERSION	POURING OF WATER	Please note: This is an attentive booking. Date will be confirmed when the signed form is returned with donation

GODPARENTS

Note: Godparents to be 16 years or older and fully initiated into the Catholic Church (baptised, confirmed and celebrated Holy Communion).

GODFATHER

FULL NAME

RELIGION

GODMOTHER

FULL NAME

RELIGION

ADDITIONAL GODPARENTS

FULL NAME

RELIGION

FULL NAME

RELIGION

FULL NAME

RELIGION

PARENT COMMITMENT - In asking for my child to be baptised;

I/We accept the responsibility of to raise him/her in the practice of the faith.

YES

NO

I/We bring him/her up to keep God's commandments as Christ taught us.

YES

NO

I/We understand that this involves commitment to participate in a preparation lesson and attend a mass service to present child.

YES

NO

I/We have read the Baptism Information sheet and completed the Enrolment Form.

YES

NO

I/We have read and accepted the Photography and Filming Policy.

YES

NO

I/We give permission for our child's name to be included in the Parish bulletin.

YES

NO

MOTHER'S SIGNATURE

DATE

FATHER'S SIGNATURE

DATE

Please ensure all relevant areas are completed and COPIES of certificates are attached. Do not include originals as these will not be returned. This form must be signed and returned to the parish office with the relevant certificates and donation to confirm a date.

OFFICE USE ONLY

Donation Received
Yes/No

Welcome Mass Attended
____/____/____

Register Number

Certificates Received
Yes/No

Priest

Additional Information

Attended Preparation Class

____/____/____

Member of Preparation Class
Signature