

St Joseph's Church

(Clifton Diocese)

Devizes Road, Wroughton, Swindon, SN4 ORZ, Tel: 01793 812 330, Email: wroughton.stjoseph@cliftondiocese.com

APPLICATION FOR BAPTISM

Sur	name of Child	Forename(s)	
Dat	te of Birth	Place	
Full Name of Father		Religio	n
Ful	l Name of Mother	nee	Religion
Ado	dress		
	Telephone Number		
Full Name of Godfather			Religion
Full Name of Godmother			Religion
	NB: Either Godfather o	r Godmother must be a pro	acticing Catholic
DA	TE AND TIME OF BAPTISM (To be agreed with Fr	r. Isidore Obi)	
Thi	 be baptised is to: Become a Child of God Become a Member of the Church of Christ Share in the Death and Resurrection of Christ Become a Template of the Holy Spirit s involves the serious undertaking to lead a life of red to answer the following questions: Do you realise that in asking to have your child Catholic Church, so that by observing the command 	attachment to our Lord Jo d baptised, you accept tl	ne duty of raising him/her in the faith of the
, , ,			
	Will you fulfil this duty by word and example?	Answer	
2.	We/I declare that we/I understand the meaning, the privileges and the duties of baptism. We/I undertake the serious obligation to bring our child to Mass each week and give him/her a Catholic education. We/I have answered the questions truthfully before God. Signatures[Father]*		
	le the coop of a "asimal" accoming the combiner		[Mother]*
	In the case of a "mixed" marriage the partner w undertaking. If not, he/she is asked to make the f I willingly allow my child to be baptised according Sign	following declaration:	
	If the child's parents reside of the parish boundar I, Parish Priest of hereby give permission for the	ries, the local Parish Priest	- ,
	Sign	nature	Date