

## BAPTISMAL REGISTRATION FORM

Child's Surname: \_\_\_\_\_  
 First Name: \_\_\_\_\_  
 Middle Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Place of Birth: \_\_\_\_\_

**Please print: The information presented here is replicated onto the certificate of baptism and in the baptismal registrar**

Date of Baptism	
Place of Baptism	Star of the Sea Parish
Time of Baptism	
Celebrant's Name	Fr Rony Kalapurackal Chacko
Mother's Full Name	
Mother's Maiden Name	
Mother's Religion	
Father's Full Name	
Father's Religion	
Family Address	
Phone Numbers	Mobile: _____ Other: _____
Email	
Godparent's 1 Name	
Godparent's Religion	
Godparent's 2 Name	
Godparent's 2 Religion	

**Requirements:**

1. **PRESENTATION OF YOUR CHILD:** Father Ashley requires that your child is formally presented to the parish community for a blessing. This is done on 1<sup>st</sup> Sunday of the month during the 8:30am Mass. Please indicate date and time of the Mass you will attend for the presentation:  
 \_\_\_\_\_
  
2. **BAPTISMAL PREPARATION CLASS:** This is held on 1<sup>st</sup> Sunday of the month in the Parish Hall and begins 9:45am. Please indicate date of the class you will be attending: \_\_\_\_\_

Office Use Only	
Birth Certificate	
Parents & Godparents Baptismal Certificates	
Baptism Register	
Baptism Information Form	
Prep Class	

**FAMILY LAW MATTERS**

A copy of any Court Orders concerning residence arrangements for the child, time spent by the child with either parent, or parenting issues must be supplied with this Enrolment Form.

Are there any such Orders?

**Yes/No**

Has a copy of every such Order been attached to this Enrolment Form?

**Yes/No**

I hereby give my consent for the child to be Baptised in the Catholic Church

Father's Signature..... Date .....

Mother's Signature ..... Date .....