OUR LADY QUEEN OF PEACE -BAPTISM REQUEST FORM (Copy of Civil Birth Certificate must accompany this form)

| Childs Surname: |
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| Childs first Name (s): (as on birth cert) |
| Date of Birth (Format DD/MM/YY) |
| Address of Parents: |
| Telephone /Mobile No: |
| Parents E Mail: |
| Fathers Name - Surname: |
| First Name |
| Mothers Name - Surname: (Please include maiden name) (mother's maiden name will be used) First Name |
| **Godfather:Address |
| **Godmother:Address |
| Signature of Mother: |
| Signature of Father: |
| Today's Date :Date of Baptism: |
| Do you consent to you child's photo being displayed in the church (No names will be used) |
| Yes No |
| ** Minimum requirement of one Godparent. If there are two, there must be one male and one female. Minimum age of a Godparent is 16, and Godparents must be Baptised and Confirmed. |
| Privacy Statement The information contained in this Form will be used to register this Baptism in the Parish. The Copy of the Birth Certificate you submitted will be destroyed once the Baptism is registered. The information in the Parish Register will be retained permanently. |
| We would like to let you know about different future events/celebrations taking place in the Parish. Are you happy that we use the contact information you have provided to do this? |
| YES |
| Signature (s) Date: |
| If you tick the box, we will add you to our mailing list. You can unsubscribe at any time by contacting the parish office secretary@queenofpeace.ie or at © 01-2745497 |