

2 MILLS STREET LIDCOMBE NSW 2141 AUSTRALIA ABN: 29 748 376 716





## **BAPTISM REQUIREMENTS & PREPARATION**

- Baptisms are done every Second and Fourth Sundays of the month
- Parents are invited to attend Morning Tea & Baptism Info Session on the First Sunday of the month
- Please complete the attached Baptism Application form and return it with a copy of your child's Birth Certificate
- Please ensure that Godparents are Catholics. Non-Catholics can be listed as witnesses
- It would be good if you could attend the 10am Mass on the chosen Baptism day

On the Day of Baptism please bring the following:

- White Garment
- > Baptism Candle
- Small Towel to wipe the child's head after baptism
- Offering for the Church/Priest

Any other queries please email the Parish Secretary at office@stjoachimsparish.org

ST. JOACHIM'S CATHOLIC PARISH

2 MILLS STREET LIDCOMBE NSW 2141 AUSTRALIA

ABN: 29 748 376 716





	DETAILS OF	THE PERSO	ON TO BE I	BAPTISE	D
Surname					
Christian name					
Date of birth			Place of birth		
PARENT'S DETAILS					
FATHER			MOTHER		
Full name			Full name		
		_			
			MAIDEN NAME		
RELIGION			RELIGION		
N. D. C.					
CHURCH OF MARRIAGE			CONTACT NUMBER (PHONE/ MOBILE)		
CHORCH OF MARRIAGE			CONTACT NOMBER (THORES MOBILE)		
Email Address					
Residential Address					
Name of Basish (if we also from a the analysis)					
Name of Parish (if you're from other parish)					
		Godpare	ents		
Full Name			Religion		
Full Name			Religion		
Full Name			Religion		
Full Name			Religion		
The following is to be filled out only after discussions with the Parish Priest or Secretary, as to the available dates.					
INTENDED DATE OF BAPTISM					
NAME OF PRIEST CELEBRANT					