

ST JOSEPH PIGNATELLI
ENROLMENT FORM FOR SACRAMENT OF BAPTISM

FAMILY NAME:	
GIVEN NAMES:	
GENDER:	
DATE OF BIRTH:	
FULL NAME OF FATHER:	_____
Religious Affiliation:	
FULL NAME OF MOTHER:	_____
Religious Affiliation:	
MOTHER'S MAIDEN NAME	
Any Legal impediment prohibiting your child from being baptised.	Yes <input type="checkbox"/> No <input type="checkbox"/>
ADDRESS:	_____
	Suburb: _____ Post Code: _____
TELEPHONE:	(M) _____
EMAIL ADDRESS:	_____
IMPORTANT: The Sponsor is to be a Catholic who has been confirmed and has already received the most holy sacrament of the Eucharist and who leads a life of faith in keeping with the function to be taken on. The Sponsor should be at least 16 years old.(Canon Law 874)	
NAME OF SPONSOR	_____
Religion:	
NAME OF SPONSOR:	_____
Religion	
NAME OF SPONSOR:	
DATE OF BAPTISM:	
TIME OF BAPTISM:	

THE FOLLOWING SHOULD BE COMPLETED IN DISCUSSION WITH THE PRIEST

DO YOU LIVE IN THE ATTADALE PARISH OR WORSHIP AT THE PARISH ON A REGULAR BASIS?	
IF YOU ARE A MEMBER OF ANOTHER PARISH HAVE YOU SPOKEN TO YOUR PARISH PRIEST ABOUT THIS BAPTISM?	
DATE OF BAPTISM:	
TIME OF BAPTISM:	
NUMBER OF PEOPLE ATTENDING:	