



# ST JOHN'S UNITING CHURCH ESSENDON

## Request for Baptism of a Child

*Baptisms are normally celebrated on the 3rd Sunday of the month*

(Please use BLOCK printing throughout)

CHILD'S FULL NAME (& GENDER) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

PROPOSED DATE FOR THE BAPTISM \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOBILE \_\_\_\_\_

Have you been baptised? Yes/No                      Have you been confirmed? Yes/No

MOTHER'S NAME \_\_\_\_\_

MOBILE \_\_\_\_\_

Have you been baptised? Yes/No                      Have you been confirmed? Yes/No

HOME ADDRESS \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

Best Email for on-going Contact \_\_\_\_\_

Please provide the names of any Godparents (*normally two people*): and their contact details:

\_\_\_\_\_  
\_\_\_\_\_

Video? Yes/No (*This is OK but must be used with discretion*) Number of Guests? \_\_\_\_\_

**Parents Declaration:** *I/we have carefully read the Baptism preparation literature provided by St John's Uniting Church and I/we are comfortable with the promises and commitment I/we will make before God in this celebration.*

Mother: \_\_\_\_\_ Father: \_\_\_\_\_ Dated: \_\_\_\_\_

**For Office Use:**

Arrangements Confirmed: \_\_\_\_\_ Minister: \_\_\_\_\_

Church Council Approval Date: \_\_\_\_\_ Elder/Pastoral Carer: \_\_\_\_\_

Baptismal Preparation Dates \_\_\_\_\_

Preparation Completed \_\_\_\_\_ Bible [ ] Candle Made [ ] Godparents Cert [ ]

Baptismal Certificate Prepared [ ] Thank-you card sent to Godparents [ ]

Baptismal Register filled in [ ] Follow up cards given to Elder [ ]