ST MICHAEL'S ASHBURTON INFANT BAPTISM BOOKING FORM



(Please read Policy for Sacrament of Baptism before completing this form)

(To ensure accuracy of details please use legible block letters on this form)

Child's Given Names	
Child's Family Name	
Child's Date of Birth//20	
Mother's Maiden Name	(required for the Baptism Certificate)
Mother's First Name	_ Mother's Family Name
Father's First Name	Father's Family Name
Address	Suburb
Telephone (H)	(M)
Email	
Godparent 1	Godparent 2
Godparent 3	Godparent 4
morning of every odd month of the year from 10 evening of every even month of the year at 6:00 note that there are no Information Sessions in January 10 to	pm to 7.00pm at St Michael's Church. Please anuary or November.
Please circle preferred month for	the Baptism Information Session:
Feb March April May June	July August Sept Oct Dec
2) The Welcome Mass occurs in the weeks before 10:30am. Please note that there is no Welcome	•
Please circle preferred 3rd Sunday	of the month for the Welcome Mass:
Feb March April May June J	uly August Sept Oct Nov Dec
3) Baptism is celebrated outside of Mass at 11:2 Sunday. Baptism may take place during Mass of	·
Please write preferred date	for Baptism//20
4) For information about donation and methods Payment Form on website. If donation is made to Parish Office.	of payment, please refer to Baptism Policy & by direct debit please email copy of bank receipt
Please send Booking Form with dor	nation to St Michael's Parish Office to

Please note there are no baptisms from 29 December 2019 to 19 January 2020 inclusive.

ashburton@cam.org.au