

REGISTRATION FOR BAPTISM OF A CHILD

THIS FORM MUST BE FILLED IN & SIGNED BY THE PARENTS OF THE CHILD AND RETURNED TO PARISH OFFICE WITH PAYMENT TO SECURE YOUR BOOKING:

PARTICULARS ARE FOR THE BAPTISMAL REGISTER
(Please Print in **BLOCK** letters)

SURNAME of CHILD	CHRISTIAN NAMES*
Address:	Phone:
Date of Birth:	Place of Birth:
Father's Name & Surname:	Mother's First Name & <u>MAIDEN NAME:</u>
Religion:	Religion:
Occupation:	Occupation:
Paternal Grandfather's Full Name: (This is your baby's grandfather)	Maternal Grandfather's Full Name: (This is your baby's grandfather)
Paternal Grandmother's Name & Maiden Name: (This is your baby's grandmother)	Maternal Grandmother's Name & Maiden Name: (This is your baby's grandmother)
Place of Marriage: (Church or other/Town/Country)	

Name of Godparents:

.....Religion:.....

.....Religion:.....

.....Religion:.....

Names of other children & ages (*include date of birth*):

.....

.....

OFFICE USE ONLY

Requested day for Baptism:	Date:	Time:
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* Parents should be reminded that traditionally children are given the name of a Saint so that they have a patron in heaven.

QUESTIONS TO BE ASKED SO AS TO GAIN SOME UNDERSTANDING OF THE FAMILY COMMITMENT TO THE FAITH:

(Please circle the appropriate response)

Is the family a member of the Parish? YES NO

if no, what is your Parish? _____

Is the family known to the Parish? YES NO

Does the family have any active involvement with the Parish? YES NO

If yes, please indicate by ticking the appropriate boxes

- Regularly participates at Mass
Occasionally participates at Mass
Rarely participates at Mass
Participates in Parish activities
Supporters of the Parish
Other, please explain

(Any further comments that need to be made)

- We have other siblings attending the Parish school
I give consent for the Parish to share Name, Address & Date of Birth with the Parish Primary School.

REQUEST FORM

FOR PARENTS:

We request that our son/daughter be received into the community of God's people, at the celebration of the Sacrament of Baptism.

We personally believe in Jesus and in His Gospel. We are dedicated to the Christian way of life and wish to share the joy of this faith with our children.

We understand that we are the first teachers of our children and are responsible for the Christian upbringing of our child. In particular, we acknowledge our commitment to be faithful to Christian family life and to the celebration of the Eucharist.

We are aware that our child must be carefully prepared over a period of time for full, active participation in the Sacramental life of the Church. We rely on God's help and the continued support of our parish community, in accepting our responsibility, as Christian parents.

SIGNED.....SIGNED
Father Mother

INTERVIEWER.....DATE.....

REQUEST FORM FOR GODPARENTS

*Please return this form at the **Baptism Instruction**.*

INFORMATION FOR GODPARENTS

1. A Godparent must have received the Sacraments of Baptism, Confirmation and Eucharist.
2. A Godparent must be mature enough to undertake this responsibility.
3. A Godparent must be a member of the Catholic Church.*
4. A Godparent must be at least 16 years of age.

**A Baptized and believing Christian from a non-Catholic Church may act as a Christian witness along with a Catholic Godparent. (Canon 874)*

I / We wish to act as Godparents and accept our responsibilities during the celebration of the Baptism of (name of child).....

I / We are loyal members of the Catholic Church and seek to live out the responsibilities of Confirmed Christians who regularly celebrate the Eucharist. We are dedicated to Christ and His Church and we wish to be associated with these parents in sharing the joys and challenges of our faith with their children.

I / We understand that to be followers of Christ, we must be faithful to prayer and to the celebration of the Sacraments. We acknowledge our need of God's help as we accept the honour and responsibilities of Godparents of this child.

- I am a Catholic and have received the the Sacraments of Baptism, Confirmation and Eucharist.**
(This must to be completed by one Catholic Sponsor – A non-Catholic person cannot be a Sponsor, and they can only be an official Witness to the Baptism, according to Canon Law 874)

Signed: Signed:
Catholic Sponsor

Signed: Signed:

BAPTISING YOUR CHILD
at **ST.FRANCIS OF ASSISI CHURCH**
59 Newton Road, Newton 5074
Phone: 8337 3849 Mobile: 0403 807 100

INFORMATION SHEET FOR PARENTS

USUAL TIMES FOR BAPTISMS: Baptisms are usually celebrated on
Sundays at 12.30pm OR 1.00pm (depending on availability of the Priest and the Church)

Please contact the Parish Office between 9am – 4pm to make a booking

GROUP BAPTISMS: There may be more than one Baptism at the same time. (*No more than four*)

BE ON TIME: Please remind people to be on time - otherwise it may inconvenience others.

SPONSORS FOR BAPTISM: All sponsors for Baptism, according to Canon Law 874, must be Confirmed Catholics, who have received Holy Communion and show that they live a life of faith. Sponsors should be not less than 16 years of age. A father or mother of the child cannot be a Sponsor. Only one Sponsor is necessary but two are allowed. A non-Catholic person cannot be a Sponsor, they can only be an official Witness to the Baptism if there is a Catholic Sponsor present.

REGISTRATION: Requirement for registering your child's Baptism:

Baptism papers can either be collected or sent via email for parents to complete at the time of booking the Baptism. You will be required to complete the first two pages and ensure that it is signed by both parents, necessary for the Baptismal Register and to secure your booking. Also you will receive the Request Form for Godparents Form, which needs to be submitted at the Instruction session (see notes below).

**INSTRUCTION: Requirements for preparation for your child's Baptism:
FOR PARENTS AND ALL GODPARENTS:**

A one hour '**Baptism Instruction**' session for both parents and Godparents. This is held in the Bishop Kennedy Room of the Church (enter at the front of the Church and proceed upstairs). The date and time for this Instruction will be given to you prior to the Baptism. The completed Request Form for Godparents should be signed by the Godparents and returned at the Baptism Instruction.

BAPTISMAL ROBE, BIB & CANDLE

These are suggested and memorable gifts from the Godparents. The Candle may be purchased from Christian Supplies at Findon. The Baptismal Robe & Bib should be white and is available from most babywear shops.

OFFERING (either Cash or EFT):

Towards the Parish: \$100

Clergy Stipend: \$100

After payment has been made, send an email to the Parish Office. This can also be made by cash when you return your signed Registration forms at the Parish Office before the Baptism.

Electronic Banking Details for PARISH \$100

A/c Name: CCES Inc Newton Parish

BSB: 066-782

A/c Number: 1000 00278

Reference: 778BAP (Surname/Date)

Electronic Banking Details for PRIEST \$100

A/c Name: Diocesan Presbytery Fund/Newton

BSB: 066-782

A/c Number: 1000 27214

Reference: 778BAP (Surname/Date)

The

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Southern Cross

Living Catholic

TELL EVERYONE ABOUT YOUR CHILD'S BAPTISM

The Southern Cross is South Australia's award winning Catholic newspaper serving communities across the State
Copies are distributed through parishes and subscribers – local, interstate and overseas.

Your notice will be appear in *The Southern Cross* and on *The Southern Cross* website. There is no cost to you.

Simply give us the information below and we will do the rest. If we need further details we will contact you.

Please print

Child's name(s): _____

Child's Godparents' name(s): _____

Parents' names: _____

Parents' suburb of residence: _____

(NB: Due to space restrictions we may not be able to print
all the Godparents' names if there are more than four.)

Baptism details

Date of baptism: _____

Name and address of Church (or other location) where baptism took place: _____

Name of Priest who baptised your child: _____

Parents' contact details

Daytime phone no(s): _____ Mobile no(s): _____

Email address(s): _____

Baptism photos and details

We would love to publish a photo of the special day - it can be a single photo of child or a group shot. We will need:

* High resolution image. * Names of people in the photo, listed left to right.

Mail to: Catholic Communications, 39 Wakefield Street, Adelaide SA 5000

Fax 08 8232 3740 or E: cathcomm@adelaide.catholic.org.au Ph: 8210 8117 for assistance.

The Southern Cross cannot guarantee that notices and/or photos will appear in the newspaper due to circumstances affecting space available. Notices will appear solely at the discretion of the Editor.

