

Saint Mary – Erskineville ----- Application for Baptism

21 Swanson St Erskineville NSW 2043

ph. 02 9516 3542

Email – admin@stmaryserskineville.org.au

web – www.stmaryserskineville.org.au

Date of Baptism	
Child's full Name (Baptism -Saint Name)	
(Other name if apply)	
Date of birth/ (male or female)	
Address	
Parent full names	
Religion/ parish resident	
Contact detail: Mobile/ email	
Name of Godparents (1) (religion of Godparent if apply)	
Name of Godparents (2) (religion of Godparent if apply)	

Signed consent for Baptism of the parents. This is an Archdiocesan directive that has arise out of legal matters regarding family law issues.

Parent 1 Parent 2