



St Mary Magdalene Church, Monaleen Baptism Request Form



(Please complete in BLOCK CAPITALS)

Child's Surname _____
 Child's Christian Names _____
 Date of Birth _____
 Date of Baptism _____
 (Saturdays 4pm - Sundays 12.30pm)

Mother's Maiden Name _____ <i>(Including first name)</i>	Father's Name _____ <i>(Including first name)</i>
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Address of Parents _____

Phone Number _____
 Email Address _____

Godmother* Name _____	Godfather * Name _____
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We request Baptism for our Child	
_____ <i>Signature of Mother **</i>	_____ <i>Signature of Father</i>
CELEBRANT	_____ <i>Signature of officiating Deacon/Priest/Bishop</i>

Some details to keep in mind:

- *Minimum requirement is one Godparent. If there are two they must be male and female. Your child's God-Parents should be people of faith who will assist you to bring your child up in the faith of the Catholic Church. They must be at least 16 years of age and have received the Sacrament of Confirmation.
- **Signature of Mother alone suffices where she is unmarried, is sole guardian and is not requesting that the father's name be entered in the Baptism register.

Privacy Statement

- The Information contained in this 'Request Form' will be used to register this Baptism in the Parish records of St Mary Magdalene Church, Monaleen. (Pastoral Area 1)
- Entry into the Baptism register must be identical to information details supplied to the State. Copy of the Birth Certificate submitted will be destroyed once the Baptism is registered.
- The information in the Parish Register will be retained permanently.

Please ensure this Request Form along with copy of Civil Birth Certificate
arrives as soon as possible but no later than two weeks before the Baptism to:

POST: Baptism Requests, 1A Trinity Court, Monaleen Road, Castletroy, Limerick.V94 Y308

EMAIL: info@monaleenparish.ie

Any Queries: Ms Brid Hession, 061 338340 (Office hours, 07.45-12.45, Tue, Wed & Thu mornings)