

# Parish of Grand Bay

## Baptism Request Form

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Child's Name \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Mother's Name \_\_\_\_\_  
(given names) (current surname) (maiden surname)

Mother's Date of Birth \_\_\_\_\_ Baptized: Yes \_\_\_ No \_\_\_

Mother's Occupation \_\_\_\_\_

Father's Name \_\_\_\_\_  
(given names) (surname)

Father's Date of Birth \_\_\_\_\_ Baptized: Yes \_\_\_ No \_\_\_

Father's Occupation \_\_\_\_\_

Date of Marriage \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

<u>Sponsors</u>	<u>Denomination</u>	<u>Baptized (yes/no)</u>
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Date of Baptism \_\_\_\_\_