



Chaplaincy of Aquitaine Application for Baptism

Child's Christian name(s) and Surname

Date and place of birth:

Date of Baptism and Church Location

How many guests are you planning to invite? (approx.)

Father's Christian name(s) and Surname

Telephone

Email

Have you been baptised?

Have you been confirmed?

Father's occupation

Mother's Christian name(s) and Surname

Telephone

Email

Have you been baptised?

Have you been confirmed?

Mother's occupation

Address

Home landline

Other children in the family – please give names and ages

Names and addresses of Godparents (one Christian name in full. Mr, Mrs, Miss)

1

2

e-mail:

e-mail:

Telephone:

Telephone:

Baptised: yes/no

Confirmed? yes/no

Baptised: yes/no

Confirmed? yes/no

3

4

e-mail:

e-mail:

Telephone:

Telephone:

Baptised: yes/no

Confirmed? yes/no

Baptised: yes/no

Confirmed? yes/no

When completed, please return to Chaplaincy Administration: chapaq.office@gmail.com