Anglican Church
East Lake Macquarie Anglicans
Coming together to build the future

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BAPTISM REQUEST

Please print & use full names **Date of Application** _____

Candidate's Name _____ Gender _____

Date of Birth _____ Age _____

Place of Birth (City & Country) _____

Address _____

City _____ State _____ Postcode _____

Father's full name _____

Occupation _____

Email address _____

Mother's full name _____

Occupation _____

Email address _____

Religious Affiliation of Parents _____

Telephone: Home _____ Work _____

Names & Ages of other children _____

Sponsor/Godparent _____

Address _____

Sponsor/Godparent _____

Address _____

Proposed Date of Baptism: _____ Time: _____

Place of Baptism: _____

Remarks _____