

Consent To BAPTISM in the Rite of the Catholic Church

Consenting Parent, Guardian or Foster Parent must sign in the presence of a Witness
(Please Print)

Regarding **BAPTISM** of:

Child's Last Name	Given Name(s)	Birth Date: (DD/MM/YYYY)
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Address	Postal Code
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To the Pastor/Pastoral Assistant

1. I, the undersigned declare that my full name, birth date, address, phone number, email and occupation are:

Last Name	Given Name(s)	Birth Date: (DD/MM/YYYY)
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Address	Postal Code
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Phone	Email	Occupation
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2. I am a ☐ Parent ☐ Guardian ☐ Foster Parent of the child named above.
3. I hereby consent to that child celebrating Baptism according to the Rite of the Catholic Church.
4. I fully understand this Consent Form.

Signed on _____
Date: (DD/MM/YYYY)

Signature of Consenting Parent/Guardian/Foster Parent

In the presence of

Signature of Witness (other than a parent or guardian)

Last Name of Witness	Given Name(s)
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Address	Postal Code
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Phone	Email
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