



**CLIFTON  
DIOCESE**

**Parish of the Immaculate Conception  
St Joseph's Place,  
Devizes,  
Wiltshire,  
SN10 1DD  
Telephone: 01380 723572  
Fax: 01380 723377  
E-mail: devizes@catholic.org**

## **Application for Baptism**

Surname of Child \_\_\_\_\_

Christian Names<sup>1</sup> \_\_\_\_\_

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

Father's name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's name \_\_\_\_\_ Religion \_\_\_\_\_

Maiden name \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_ . Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Place of Marriage \_\_\_\_\_

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

Proposed date and time of Baptism \_\_\_\_\_

Godfather<sup>2</sup> \_\_\_\_\_

Godmother \_\_\_\_\_

<sup>1</sup> One of these names ought to be a Saint's name.

<sup>2</sup> One of the Godparents must be a committed and practicing Catholic. He or she must be sixteen years old and have received the Sacrament of Confirmation



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## **TO BE BAPTISED IS TO**

BECOME A CHILD OF GOD

BECOME A MEMBER OF THE CHURCH

SHARE IN THE DEATH AND RESURRECTION OF JESUS

BECOME A TEMPLE OF THE HOLY SPIRIT

AN HEIR TO THE KINGDOM

A HERALD OF THE GOOD NEWS

As these involve a serious undertaking from the part of the parents, hence you are asked to consider and answer the following questions.

a) In asking to have your child baptised, you are accepting the responsibility of training him/her in the practice of the faith. It will be your duty to bring him /her up to keep God's commandments as Christ taught us by loving God and our neighbour.

### **Do you clearly understand what you are undertaking?**

b) Parents are the first teachers of their child in the ways of faith, bearing witness to the faith by what you say and do.

### **Will you try your best to keep the flame of faith alive in his/her heart?**

We (I) declare that we (I) understand the meaning, privileges and duties that will follow from the Sacrament of Baptism and that we (I) will carry out these duties sincerely before God.

SIGNED Mother: \_\_\_\_\_

Father: \_\_\_\_\_