

ASSUMPTION CHURCH, P.J.

70 Jalan Templer

46050 Petaling Jaya

Selangor Darul Ehsan

Tel: 03-77825854/03-77844470 Fax: 03-77824561

APPLICATION FOR BAPTISM

(Keep this page for your reference)

Kindly enclose a photocopy of your marriage certificate and your child's birth certificate with the application form.

It is a necessary condition that parents and Godparents attend the pre-Baptism session in the Parish where their child is to be baptised.

PRE-BAPTISM SESSION: AT THE ASSUMPTION HALL ON

THURSDAY.....AT 8.00PM

DATE OF BAPTISM:

SUNDAY.....AFTER THE 8.30AM MASS

REGISTRATION CLOSING DATE:.....

Instruction for Parents & Godparents:

You are asking to have your child baptised. In doing so, you are accepting the responsibility of bringing up your child in the practise of the Catholic Faith (of the RITE OF BAPTISM).

Therefore it follows that:

- One parent at least and both Godparents who are Catholics should be present at the Baptism ceremony.
- In the case of mixed marriages the non Catholic party must provide a letter of commitment to bring up the child in the Catholic faith.
- You give your child a Baptismal name that has a relation to the Catholic Faith or is otherwise meaningful. It could be a name from the Bible, a name derived from that of a Saint, or even a close relative. Avoid the names of pop idols or precious gems. Remember that the gift of a name signifies the holiest human experience – entry into relationship.
- As the first Teachers of your child you are responsible for the Religious Education of your child by word and example.
- See that your child of 5 years and above attend Sunday School.
- Ensure that your child will receive the Sacraments, beginning with the Sacrament of Reconciliation (Confession) followed by 1st Holy Communion and then Confirmation.

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Application Form for 'BAPTISM OF INFANTS'

INFANT

NAME: (as on birth certificate)

BAPTISMAL NAME:

DATE OF BIRTH: Place of birth:

PARENTS

NAME OF FATHER: MOBILE NO:

BAPTISM DATE & PLACE

CONFIRMATION DATE & PLACE

RELIGION: (Please tick)

CATHOLIC CHRISTIAN BUDDHIST HINDU SIKH OTHERS: Pls. specify)

NAME OF MOTHER: MOBILE NO.....

BAPTISM DATE & PLACE:

CONFIRMATION DATE & PLACE:

RELIGION: (Please tick)

CATHOLIC CHRISTIAN BUDDHIST HINDU SIKH OTHERS: Pls. specify)

HOME ADDRESS:

..... TEL. NO.

PLACE OF MARRIAGE: DATE:

GODPARENTS: (MUST BE PRACTICING CATHOLICS)

NAME OF GODFATHER:

BAPTISM DATE & PLACE:

CONFIRMATION DATE & PLACE:

MARRIAGE DATE & PLACE

NAME OF GODMOTHER:

BAPTISM DATE & PLACE:

CONFIRMATION DATE & PLACE:

MARRIAGE DATE & PLACE

PARENTS' SIGNATURE: DATE:

Father

Mother

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For Parish Office Use Only

Form received on Sacrament administered on

By Rev. Father

Signature of Priest: Date: