

**REQUEST FOR BAPTISM OF CHILDREN**  
Diocese of Fredericton

**FAMILY**

Surname
Address and Phone
Parish Church
Agreed Date of Baptism

**CHILD**

Full Name
Birth Date
Place of Birth

**MOTHER**

Full Name	
Maiden Name	
Occupation / Profession	
Baptized? YES   NO	Confirmed? YES   NO

**FATHER**

Full Name	
Occupation / Profession	
Baptized? YES   NO	Confirmed? YES   NO

**SPONSORS**

Name and Address
Name and Address
Name and Address

**PARENTS' REQUEST FOR BAPTISM**

We desire to bring our child to Holy Baptism, so that we may bring him/her up in the Christian Faith as a loyal member of the Church. We will co-operate fully with our parish church towards this end, and do all we can to foster his/her faith by our example and prayers.

FATHER'S SIGNATURE \_\_\_\_\_  
MOTHER'S SIGNATURE \_\_\_\_\_  
OR  
SIGNATURE OF GUARDIAN \_\_\_\_\_

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