



## Baptismal Request Form

Proposed Date of Baptism: ..... /20 ..... Time: .....

Child's Christian Name(s): .....

Child's Surname: ..... Date of Birth: ..... /20 .....

**Please Note:** Child's surname entered here must be the same as that on Civil Birth Certificate

Father's full name: .....

Mother's full name: ..... Maiden name: .....

Address: .....

Phone No ..... Mobile: .....

Email: .....

Year and place of Marriage: .....

If couple are not married, please enter the child's civil Birth Certificate No: .....

Are both parents Catholic? .....

Full names of both Godparents: .....

Other children's names: .....

Place/Church of Baptism: .....

**\*Your privacy is important to us.** As part of the new Data Protection legislation governing Ireland, we are required to keep a record of your consent to process your personal data. It can include your name, email address, address and phone number. We will only keep your personal data as long as it is necessary and it will not be passed on to any unauthorised third parties.

We would like to continue to contact you regarding Baptism.

Please tick this box to confirm your consent.

We would also like to contact you in relation to other Parish Activities we feel might be of interest to you, e.g. Celebration of Sacraments, Christmas, Pilgrimages, Faith Formation, Fundraising etc.

Please tick this box to confirm your consent.

On certain occasions, e.g. the celebration of Sacraments, Christmas etc., we would like to publish images from our celebration on our website and/or Social Media platform.

Please tick this box to confirm your consent.

At any time in the future if you would like to withdraw your consent to any of the above, please contact your Parish Priest.

*The Parochial House, Sooey, Via Boyle, Co. Sligo. F52 RC67*

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