



Pre-baptismal Enquiry Form

St. Peter's Catholic Church

208 High Street, Bloxwich, WS3 3LA

Telephone: 01922 476 765 Email: stpeters.bloxwich@rcaob.org.uk

Agreed Date for this Baptism is _____ Time _____

Child's First Names. _____

Child's Surname. _____

Child's Date of Birth. _____

Father's Name. _____

Mother's Name. _____

Child's Mother's Surname before marriage. _____

Current Home Address. _____

A Phone Contact. _____

God-parents to Child. _____

Witness. _____

Administration Fee

£25. Please bring administration fee to the pre-baptismal meeting (date to be agreed below).

Points To Consider

You only need two God-parents who have to be Catholic and over 16 years of age. A non-Catholic Christian may stand alongside the godparents as a witness.

Please make sure that godparents, family members, and guests, know exactly where the Church is and that they arrive in good time. Please remember there is to be no eating and drinking in the Church. If there are guests who do not know about the Catholic Church perhaps you can let them know about expectations of going into Church. These will be discussed at the compulsory pre-baptismal meeting.

Date of baptism meeting _____

A certificate of baptism will be given to you after the ceremony. If this is lost and another certificate is required then there is an administration fee of £10 for reissuing the certificate.

Legal Question

It may be the case that a separated partner will have a right to decisions involving their child. Having a child baptised is considered such a decision. When you fill in this form and sign it you are declaring that such consent, if required, has been sought and given to you.

Signed by _____ Print Name _____