HOLY SPIRIT PARISH 2 KEANEY PLACE CITY BEACH WA 6015 PO BOX 2128 CHURCHLANDS WA 6018



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## **BAPTISM CHECKLIST**

<b>EVENTS/ITEMS</b>	DETAILS
BAPTISM FORM	Please download <b>Baptism Form</b> below this page or detach the
	Form, fill-in the needed information details and return to the
	Parish Office as soon as possible.
GODPARENTS'	Please submit with <b>Baptism Form</b> a copy of <b>Godparents' Baptism</b>
<b>BAPTISM CERTIFICATE</b>	<b>Certificate</b> . Remember, one Godparent must be a Catholic. Others
	may not necessarily be Catholics but must be baptised Christians.
BAPTISM APPOINTMENT	Please contact or ring:
	TELEPHONE: (08) 93413079 or
	MOBILE: <b>0417999553</b> or
	EMAIL: fremmanueltv@gmail.com; city.beach@perthcatholic.org.au;
	to arrange/fix a convenient Day/time for your Baptism
	Appointment before the BAPTISM
	We have baptism on SATURDAYS AND SUNDAYS of every week at
	11:00am. Choose any Saturday or Sunday of your choice. Invite
<b>BAPTISM DAYS/DATES</b>	your family members and friends; and bring your camera to take photos. While coming for the baptism, please bring the following:
	photos. While conning for the baptism, please bring the following.
Saturdays @11:00am	A. A Baptism Candle: Available at "Gatto Christian Shop" (108 Wanneroo Road, Tuart Hill) or at any other known Christian shop. If you so wish, buy one with a suitable Baptismal Symbol and decorate with ribbon, name of your
Sundays @11:00am	child, and date of baptism.
	B. A White Garment (recommended): This is to be worn
	by the person to be baptised (a white christening gown for
	a baby, a white dress for a girl, a white shirt for a boy or
	any white garment)
	C. Donation/Offering: Do please detach the attached
	Baptism Offering Envelope for your Thanksgiving Offering
	to God for all the Grace, Favours and Blessings Received.
	Hand in on the Day of Appointment or give to the Priest on
	the Day of Baptism.
CONTACT DETAILS	Fr. Emmanuel-tv: 0417999553
	Parish Office: (08) 93413079
	<b>EMAIL</b> : fremmanueltv@gmail.com; city.beach@perthcatholic.org.au;
	Postal Address: P.O. Box 2128, Churchlands, WA 6018

## Holy Spirit Catholic Church, City Beach **BAPTISM FORM CANDIDATE'S DETAILS** Family Name: **Given Names:** Place of Birth: Date of Birth: M or F RELIGION **DETAILS OF FAMILY:** Father's Full Name: **Mother's Full Name:** MAIDEN: (if applicable) **Residential Address:** Telephone (Home): (Work): (Mobile): **DETAILS OF GODPARENTS (Names in full)** RELIGION PLEASE NOTE: One Godparent must be a Catholic. Others may not, but must be baptised Christians. Please submit with this Form a scanned/photocopy of Godparents' Baptism Certificate Name 1: Name 2: How long have you been in the Parish? Do you attend Mass at Holy Spirit Parish? Yes/No Are you currently part of the Parish Planned Giving? Yes/No DETAILS OF CEREMONY (BAPTISM ON SATURDAYS & SUNDAYS @11:00AM) CELEBRANT DATE TIME Donation/Offering is Recommended/Appreciated Hand in on the Appointment Day or Give to the Priest on the Day of Baptism FOR OFFICIAL USE ONLY **Date Contacted:** By: Date Visited: By: Attended? **Date of Program:** YES/NO **Census Record Updated?** YES/NO or N/A

NOTE: Please Contact Us on (08)93413079 or 0417999553 or email: <a href="mailto:fremmanueltv@gmail.com">fremmanueltv@gmail.com</a> or city.beach@perthcatholic.org.au to Fix a Date for an Appointment Before the Baptism

Contribution to Church: \$.....

**Date Details Recorded in Register:**