

OUR LADY QUEEN OF PEACE PARISH

MERRION ROAD, DUBLIN 4

TEL: 01-269 1825; www.merrionroadchurch.ie



Details for the Sacrament of Baptism

Child's Name: _____

Date of Birth: _____

Copy of Birth Certificate submitted

Proposed Date of Baptism: _____

(As on Birth Certificate)

Father's Name: _____

Mother's Name: _____
(Maiden Name)

Parents' Address: _____

Email: _____

Phone: _____ Landline: _____ Mobile: _____

Year & Place of Marriage: _____

Godfather's Name: _____

Godmother's Name: _____

We confirm that the above details are correct and we request Baptism for our child.

Father's signature: _____

Mother's signature: _____

Celebrant: _____

PRIVACY STATEMENT

The information contained in this Form will be used to register this Baptism in the Parish.
The Copy of the Birth Certificate you submitted will be destroyed once the Baptism is registered.
The information in the Parish Register will be retained permanently.

We would like to let you know about different future events/celebrations taking place in the Parish.

Are you happy that we use the contact information you have provided to do this? YES

(Signature)

(Date)

If you tick the box, we will add you to our mailing list. You can unsubscribe at any time by contacting the Parish Office at info@merrionroadchurch.ie or at ☎ 01-269 1825.