

OUR LADY QUEEN OF PEACE PARISH

MERRION ROAD, DUBLIN 4

TEL: 01-269 1825; [www.merrionroadchurch.ie](http://www.merrionroadchurch.ie)



## Details for the Sacrament of Baptism

Child's Name: \_\_\_\_\_ *(As on Birth Certificate)*

Date of Birth: \_\_\_\_\_ Proposed Date of Baptism: \_\_\_\_\_

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: \_\_\_\_\_