



Queanbeyan and District Anglican Church

Queanbeyan, Karabar, Jerrabomberra, Burra, Googong, Michelago

39 Rutledge Street (P.O. Box 103) Queanbeyan NSW 2620

Phone : 0419 924 962 (9.00am to 1.00pm Monday, Wednesday, Friday)

eMail : QueanbeyanAnglican@yahoo.com.au

ABN 46 188 232 125

Child Baptism Inquiry

Privacy notice: The Queanbeyan and District Anglican Church acknowledges and respects the privacy of its parishioners and the community. The law (Privacy Act 1998) requires us to advise you that the information you provide on this form is “personal information” so that we can complete the Parish register, write a certificate and contact you about this Baptism. This information will be used to invite you to join in the worship and activities of this Parish. This information can be viewed, altered or removed. Copies of this information will only be available to the Staff and other Parishioners having legitimate interest in the mission of the Parish. Thank you for your cooperation.

The Child to be Baptised:

Last name:		Given names:	
Date of Birth:			

The Parents and Family:

Mother:	Full name:			
	Occupation:			
	Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Confirmed: Yes <input type="checkbox"/>

Father:	Full name:			
	Occupation:			
	Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Confirmed: Yes <input type="checkbox"/>

Other Children:	Name:		D.O.B		Baptised	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Name:		D.O.B		Baptised	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Name:		D.O.B		Baptised	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Name:		D.O.B		Baptised	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Contact Information:

Street or PO Box:					
Suburb:		State:		Postcode:	
Phone:	Primary:		Secondary:		
Email:					

Godparents:

Name:		Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name:		Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name:		Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name:		Baptised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

With God’s help and by our prayers and example, we will encourage _____ in the life and faith of the Christian community.

Signed: _____ Date: _____