



Baptism Booking Form



Child's Surname: _____

Child's Christian Names: _____

Date of Birth: _____

Father's Christian Name and Surname: _____

Mother's Christian Name: _____

Mother's Maiden Name: _____

Address: _____

Sponsors [Godparents]: _____

Email Address: _____

Preferred Contact Number: _____

Date on which you would like Baptism to be celebrated: _____

Church in which you would like Baptism to be celebrated: _____

Are you happy to give permission for a congratulatory note for your child's baptism to be published in our parish newsletter 'The Harbour' and on our parish website?

Yes No

Please enclose a photocopy of your child's Birth Certificate when returning this form to the Parish Office.

The parish is obliged to enter the child's details as they appear on his/her Civil Birth Certificate.

Signed: _____

Date: _____

PARENT/GUARDIAN

Please return this form to: The Parish Office, New Parochial House, Monkstown, Co. Cork. T12C7YD

If you have any queries please contact the Parish Office.

The Harbour Parishes Parish Office

Tel: 021-4863267

Tuesday 10.00 a.m. to 12.00 noon.

Thursday 5.00 to 7.00 p.m.

Email: harbourparish@gmail.com

More details about the Baptism in our parish are available on www.harbourparishes.ie