

# *St Dominic's Catholic Parish*

P O Box 48097, Blockhouse Bay, Auckland 0644, New Zealand  
Telephone 09-626 6207      Email – [stdominicsparish@xtra.co.nz](mailto:stdominicsparish@xtra.co.nz)

## **BAPTISM INFORMATION**

**NAME OF CHILD**

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**DATE OF BIRTH**

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**NAME OF FATHER**

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**NAME OF MOTHER**

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**MAIDEN NAME OF MOTHER**

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**ADDRESS**

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**CONTACT NUMBER**

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**DATE OF PREPARATION**

**Session 1 on the 1<sup>st</sup> Saturday of the month**

**Session 2 on the 2<sup>nd</sup> Saturday of the month**

**DATE OF WELCOME**

**3rd Sunday at the 9:30am Mass**

**DATE OF BAPTISM**

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**GODPARENT'S NAMES**

1.

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2.

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**PRIEST – Fr Ephrem Tigga**

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### **EVIDENCE OF PARENT/S BAPTISM/S**

Please attach evidence of your own baptism certificate/s when submitting this form. On the rare occasion where there are extenuating circumstances in obtaining certificate/s you must speak directly with the parish priest.

When submitting this form, we ask you to make a suggested contribution of \$50 (\$25 to support the Parish and \$25 for the Clergy Trust to support retired clergy). Please contact the Parish Priest Fr Ephrem Tigga on 09 626 2238 or 027 714 9660 if this poses difficulties. Contributions can be made online to the parish a/c: 02-0108-0707980-00

Please put the BAPTISM and your name as reference.

### **NOTES**

