

**BAPTISM BOOKINGS**

*Family details*

DATE OF BAPTISM: \_\_\_\_\_

Babys Name \_\_\_\_\_

Parents Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

*Church and Baptism Time*

***Sundays***

***1st*** Welcomes only

***2nd*** Baptisms at all Masses 6pm  8am  10am

***3rd*** No Baptisms

***4th*** John XXIII 12:00pm  Jan, March, May, July, Sept, Nov

Holy Trinity 11.30am  Feb, April, June, Aug, Oct, Dec

*Welcome and Preparation*

**Welcome Mass**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Church \_\_\_\_\_

**Preparation**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Place \_\_\_\_\_

*Administration*

Child's Name and Phone Number in Office Diary:

Letter & forms sent to family:

Staff Member & Today's Date:

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