



St. Joseph's Church, Bukit Timah
Tel: 6769-1666
Email: sjcbt.secretariat@catholic.org.sg

**REQUEST FOR
EXTRACT OF BAPTISM CERTIFICATE**

IMPORTANT: Compliance with Guidelines for the Protection of Personal Data

In filling this form, I consent to:

- a. The collection, storage, retention, adaptation, modification, reading, retrieval, use, transmission, blocking, erasure or destruction ("Processing") of the personal data provided by me in this Form ("Personal Data");
- b. The church entity processing my Personal Data for the purpose of my application.
- c. The church entity transferring my Personal Data to other church entities within the Catholic Archdiocese of Singapore, and/ or the Catholic Archdiocese overseas, where applicable.

PARTICULARS:

Please complete items marked in bold print below.

Name: _____

Father's Name: _____

Mother's Name: _____

Address at Baptism: _____ **Folio:** _____ / _____

Country of Birth: _____ **Date of Birth:** _____

Minister: _____ **Date of Baptism:** _____

God-Father's Name: _____

God-Mother's Name: _____

Confirmed in the Church of _____ **On** _____

Married to _____ **On** _____

In the Church of _____

Present Address: _____ **Postal Code:** _____

Contact No. (Home): _____ **(Work):** _____ **(Mobile):** _____

Email: _____

.....
Applicant's Signature / Date

Collected by:
.....
Name/ Signature / Date
NRIC (last 4digit):-