



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

**REGISTRATION FOR INFANT /  
 CHILD BAPTISM**

*(This form must be completed by a Parent)*

**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.

***Please attach photocopies of:***

- Child's Birth Certificate
- Church Marriage Certificate
- Godfather OR godmother's Confirmation Certificate
- Civil Marriage Certificate (ROM)

Note: At least one parent must be Catholic and married in the Church. If the parents are not married in the Church, or if there is a single parent, please consult your parish priest before submitting the infant baptism application. Only one godparent is required for our official record. Godparents must be practising Catholics who have received the Sacrament of Confirmation.

**CHILD'S PARTICULARS (Age: 0 – 5 years):**

Name (Baptism & full name as in the Birth Cert.):

\_\_\_\_\_

Sex : \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

**GODPARENTS' PARTICULARS**

God-father OR God-mother (full Name): \_\_\_\_\_

**PARENTS' PARTICULARS :**

Father's Full Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Parish: \_\_\_\_\_

Present Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Married in the Church of: \_\_\_\_\_ On \_\_\_\_\_

Is this your first child? YES / NO \* Birth Order: \_\_\_\_\_ Expected Delivery Date: \_\_\_\_\_

Father's Mobile no.: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Mobile no.: \_\_\_\_\_ Email: \_\_\_\_\_

.....  
**Signature of Parent / Date**

**PARISH OFFICE USE**

Preparation month: ..... Baptism date: .....

Minister: .....

Remark: .....