



Request for Baptism Extract

250 Banks Street
Ashgrove QLD 4060
Ph.: 07-3356 4110

Please attach a copy of your child's birth certificate

Please print in CAPITAL LETTERS

Child's Full Name: _____

Date of Child's Birth: ____/____/____ Place of Birth: _____

Name of Father: _____

Name of Mother: _____

Godparent's Full Name: _____

Godparent's Full Name: _____

Reason(s) for Reissue of Baptism Certificate

Date of Child's Baptism: ____/____/____

Name of Priest: _____

Kindly note that failure to provide full details of the baptism may delay the process to obtain the Baptism Extract

Requester's Information

Full Name: _____

Relationship to Child: _____

Mailing Address: _____

Postcode: _____

Phone Numbers: Home: _____ Mobile: _____

Email: _____

Please note that the Baptism Extract will be mailed out to your address.

Kindly ensure the accuracy of the mailing address.

Privacy

The privacy of all individuals is important to the St. Michael's and we are committed to protecting all personal information we collect and hold. Our Privacy Policy is available at Parish or on request from the Parish Office.

Privacy Collection Statement

The parishes, schools and agencies of the Archdiocese of Brisbane (we, us or our) may collect, use and disclose personal information about you. We collect personal information directly from you and may also collect personal information passively through our website. We collect your personal information to fulfil the mission and directions of our organisation, to administer the sacraments and provide pastoral care to you, to provide you with other services and products you are seeking, to communicate with you about the services and products we offer, to solicit donations and to comply with our legal and regulatory requirements. If the personal information you provide is incomplete or inaccurate, we may not be able to provide you with the services or products you seek. We may disclose personal information about you to our parishes, schools and agencies and service providers who assist us in operating our organisation.

The customary Sacrificial Offering/Stipend to the Parish for documentation is \$90.00

Parish Office Use Only:

Date	____ / ____ / 20____
Presider	_____
Church	_____
<input type="checkbox"/>	Email List (A)(B)(C)
<input type="checkbox"/>	Birth Certificate
<input type="checkbox"/>	Family Law Document
<input type="checkbox"/>	PACS
<input type="checkbox"/>	Sacramental Register
<input type="checkbox"/>	_____