

We also wish to nominate the following persons as godparents:

**Full names:**

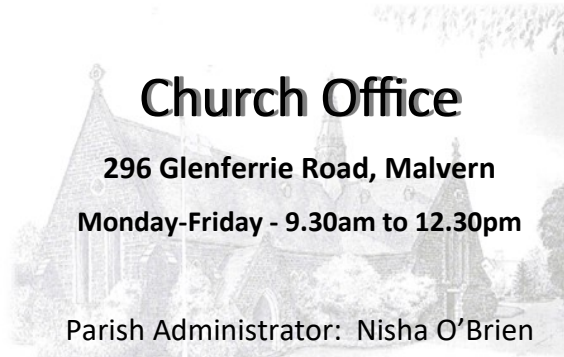
- 1. ....
- 2. ....
- 3. ....

**Declaration of godparents:**

I declare that I am a baptised Christian. It is my intention, with God’s help, to provide teaching, good example and encouragement to this child and accordingly I agree to act as a godparent to him/her, and by God’s help to encourage him/her to learn to worship God, to pray, to put his/her faith and trust in God and to take his/her place in the life of the Church.

**Signed:**

- 1. ....
- 2. ....
- 3. ....



## Church Office

296 Glenferrie Road, Malvern  
Monday-Friday - 9.30am to 12.30pm

Parish Administrator: Nisha O’Brien  
Telephone: 9822 3030

Email: [office@stgeorgesmalvern.org](mailto:office@stgeorgesmalvern.org)

[www.stgeorgesmalvern.org](http://www.stgeorgesmalvern.org)



# BAPTISM

## Request for baptism of an infant



St George's Anglican Church | Malvern

296 Glenferrie Road, Malvern, VIC 3144

**DETAILS OF BAPTISM**

**Proposed Date and Time:**

.....

**Proposed Christian Names:**

.....

**Surname:**

.....

**Date of Birth:** .....

**Is your baby a boy or a girl?** .....

**Address:**

.....

.....

**Postcode:** .....

**Telephone:**.....

**Email:** .....

**FAMILY DETAILS:**

(please print full names)

**Father:**

.....

**Occupation:**

.....

Baptised? YES/NO

Confirmed? YES/NO

**Signature:**

.....

**Mother:**

.....

**Occupation:**

.....

Baptised? YES/NO

Confirmed? YES/NO

**Signature:**

.....

**OTHER MEMBERS OF THE FAMILY:**

**Name:**

.....

**D.O.B.** .....

Baptised? YES/NO

Confirmed? YES/NO

**Name:**

.....

**D.O.B.** .....

Baptised? YES/NO

Confirmed? YES/NO

**Name:**

.....

**D.O.B.** .....

Baptised? YES/NO

Confirmed? YES/NO