CATHOLIC DIOCESE OF WOLLONGONG

REQUEST TO THE BISHOP OF WOLLONGONG FOR PERMISSION FOR BAPTISM OUTSIDE OF A PARISH CHURCH

This form is for use in conjunction with a Catholic baptism liturgy conducted by a Catholic priest or deacon

This request should be lodged **BEFORE** any planning is made for the baptism

The usual place for the celebration of baptism is a parish church (cf. can. 857-860).

Canon 857 §2 states, "As a rule and unless a just reason suggests otherwise, an adult is to be baptized in his or her proper parish church, and an infant in the proper parish church of the parents."

Exceptions to this general rule are allowed for 'a just reason', such as distance from the parish church, grave inconvenience in a particular case or even a well-founded pastoral reason.

On this form, an "adult" is one who is no longer an infant and has reached the age of reason (can. 852 §1).

FULL NAME OF PERSON TO BE BAPTISED				
SECTION A — TO BE COMPLETED BY THE ADULT TO BE BAPTISED, OR BY THE PARENTS OF AN INFANT TO BE BAPTISED				
Father of Infant Name				
(Adult's) Address				
(Adult's) Phone and Email				
Religion	Catholic Other Christian Not Baptized			
Mother of Infant Name				
Address				
Phone and Email				
Religion	Catholic Other Christian Not Baptized			
Baptism Proposed Date				
Proposed Place				
Celebrant				
Reasons for Request:				
Signed Adult / Father	Date			

Mother

Date`

SECTION B – TO BE COMPLETED BY THE PRIEST/DEACON CELEBRANT I support this application for these pastoral reasons:

I support this application for these pastoral reasons:				
Details of the suitable instruction in preparation for baptism:				
Other comments:				
Parish/Place of Residence ₹		Email ₹>		
Name	Signed		Date	
SECTION C – to be completed by the Parish Priest of the person to be baptised				
I give permission for this person to be baptized as requested.				
Other comments:			Parish Seal	
Name	Signed		Date	
SECTION D - to be completed by the Parish Priest of Intended Place of Baptism				
I support this application for pastoral reasons.				
I do not support this application for the reasons given below.				
I have no objection to this application being approved.				
Other comments:			Parish Seal	
NAME	Signed		Date	

This form is to be forwarded to the Chancery by the Celebrant or Parish Priest.

The Chancery Diocese of Wollongong PO Box 1239 Wollongong NSW 2500

Email: chancery@dow.org.au