



# ST JOHN HENRY NEWMAN, VICTORIA

*A Roman Catholic Parish of the Ordinariate of the Chair of Saint Peter*

*under the Patronage of Our Lady of Walsingham*



## ADULT BAPTISMAL, CONFIRMATION & FIRST COMMUNION REGISTRATION FORM

*Please PRINT all details in capital letters*

Date of Application : \_\_\_\_\_

Name of Applicant : \_\_\_\_\_

Date of Birth : \_\_\_\_\_

City, Province & Country of Birth : \_\_\_\_\_

Proposed Date of Baptism : \_\_\_\_\_

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

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

Home Address & Telephone Number : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Confirmation Name : \_\_\_\_\_

Sponsor's Full Name : \_\_\_\_\_

*Please return this form to [fr.lee.kenyon@ordinariate.net](mailto:fr.lee.kenyon@ordinariate.net)*