

Baptism Request form- St.Andrew the Apostle Church

1250 Barrydowne Road, Sudbury, ON - P3A 3V7

Phone: 705-566-1876

standrewsudbury@gmail.com

Please send this form to our above email or submit to the parish office.

Child's Name: _____
(First) (Middle) (Surname)

Date of Birth: _____
(Year, Month, Day)

Place of Birth: _____
(City and Province)

Father's Name: _____
(First) (Surname)

Mother's Name: _____
(First) (Surname) (Maiden)

Address: _____

Phone: _____ Email: _____

Godfather's Name: _____
(First) (Surname)

Godmother's Name: _____
(First) (Surname)