

Request for the administration of the Sacrament of Baptism of Minors

Details of the child

Name and Surname of the child: _____ Identity Card Number: _____

Other names: _____

Date of Birth: _____ Parish where the child resides: _____

Address of residence of the child: _____

The child lives with the mother father

Details of the parents and godparents

Name and Surname of Parents: _____

Identity Card Number: _____

Mobile Numbers: _____

Emails: _____

Date & parish (if applicable) of marriage: _____ Married by Canon Law (Y/N) _____

Name and Surname of the godfather: _____ Residing in the parish of: _____

Name and Surname of the godmother: _____ Residing in the parish of: _____

Attached documents: Full birth certificate Permission for Baptism Declaration: of the godfather of the godmother

We the child's parents signing hereunder:

- Declare that the information provided in this form is correct and are not aware of any ongoing legal procedures that may alter this information. We bind ourselves to inform this parish immediately if in the future, there are any changes, including in the full birth certificate.
- We are aware that this information is being collected on behalf of the Archdiocese of Malta and that this information is being retained and processed as explained in the *General Terms and Conditions for Personal Data Protection in Parishes* (Terms and Conditions), in accordance with Church laws, the *General Decree on the Protection of Data* (2018) (GDPD) and other applicable ecclesiastic and state laws. This information will be used by the Archdiocese in its various sections related to the administration and registration of baptism. For further information on the period of retention, the method of processing and the rights (as applicable) such as the right of access, the right of data portability, the right of correction, the right to object, the right of withdrawal of consent given in this form, the right of deletion and the right to lodge a complaint with the supervisory authority we are aware that we may access the *General terms and conditions* from the Archdiocese's website (www.church.mt). We are aware that we can approach the parish priest for further information or to exert these rights.
- We are aware that we have the right to make a request in writing to the parish priest where this sacrament will be administered to withdraw this request or some information included in it up to when the sacrament will be administered. This will lead to a halt in the procedures for the sacrament to be administered.
- We are aware that this information is retained and used so that we are contacted on matters related to the administration of the said sacrament, for pastoral reasons and for the registration of the baptism.
- We are also aware that once this sacrament is administered, the information in the registers is regulated by Canon Law, and by the applicable ecclesiastical laws, procedures and policies.
- We declare that we had the opportunity to read the *Terms and Conditions* before signing and we are also aware that a copy of them may be found on the site of the Archdiocese.
- We grant permission for the administration of the sacraments of the First Holy Communion and Confirmation and so that information required for sacraments to be administered and registered in accordance with what is required by the laws of the Church is collected, retained and processed.
YES NO
- We grant permission so that the information is also used to update the parishioners database which is used for pastoral reasons and is regulated by the internal laws of the Church. **YES NO (without prejudice for other consents granted).**

Signature of Father/Guardian

Signature of Mother/ Guardian

Date

Both parents/guardians are required to present their ID cards when signing this form. This form can be signed separately and in the presence of a parish representative. If the candidate's parental authority is held by one parent/guardian, only the signature of this parent/guardian is required. In this eventuality, the relevant evidence should be attached to this form.

Office Use: Date of baptism: _____ Time of baptism: _____ Place of baptism: _____

Name and designation of person who baptised: _____ Register Number: _____ Page: _____