
BAPTISM DATA FORM

Date of Baptism Seminar: _____

Child's Full Name: _____

Child's Date of Birth: _____

Child's Place of Birth (City and State): _____

Date of Baptism: _____

Father's Full Name: _____

Father's Religion: _____

Mother's Full Name (First Middle Maiden): _____

Mother's Religion: _____

Parents' Address: _____

Parents' Phone: _____

Parents' Marital Status: Married in the Church Married only Civilly Not Married

Godfather's Full Name: _____

Godfather's Religion: _____

Godmother's Full Name: _____

Godmother's Religion: _____

Name(s) of Proxies (if applicable): _____

Clergy Presider(s) at Baptism: _____

Clergy Presider(s) Signature and Date: _____

Pastor's Signature and Date: _____