

**FIRST PRESBYTERIAN CHURCH BAPTISM INFORMATION FORM**  
**REQUESTING FAMILY SHOULD COMPLETE FORM AND RETURN TO CHURCH ADMINISTRATOR**

Full Christian Name of Child: \_\_\_\_\_

Date and Place of Birth: \_\_\_\_\_

Full Christian Names of Parents:

Father \_\_\_\_\_

Mother \_\_\_\_\_

first

maiden

Siblings at Home and Ages: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Number of Expected Guests: \_\_\_\_\_

Witness(es): \_\_\_\_\_

Baptism Date. Please list 3 choices and rank in order of preference. Generally Baptisms will occur at the 11:00 Service. The date will be confirmed with you after the Baptism has been approved by Session.

*(Please note: The Declaration of a Baptism Shall not be Ordered on Holy Days or Holidays, or the First Sunday of the Month)*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**TO BE COMPLETED BY CHURCH OFFICE**

Date Approved by Session: \_\_\_\_\_

A Baptismal Counseling meeting with the Sr. Pastor is Necessary if this is the first Baptism at our church.

No \_\_\_\_\_ If yes, Date Counseling meeting was held: \_\_\_\_\_

Minister Officiating: \_\_\_\_\_

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

**Please note: No pictures may be taken during worship services.**

This form can be mailed or faxed back to the church. The church address is 200 E. Main Street, Northville, MI 48167. The FAX number is 248 349-6474. Please call to confirm that the church received the FAX.

(Revised June 2008)