

# Infant/Child Baptism Inquiry Form

Today's Date: \_\_\_\_\_

Names of Infant(s) or Child(ren):

*(Please write full names as they should appear on certificate.)*

1 \_\_\_\_\_ 3 \_\_\_\_\_

2 \_\_\_\_\_ 4 \_\_\_\_\_

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

Address: \_\_\_\_\_ ph.(h) \_\_\_\_\_

\_\_\_\_\_ (c) \_\_\_\_\_

\_\_\_\_\_

Parent's Names: \_\_\_\_\_

Parents, briefly explain your commitment to Christ. *(Please be sure to include when and how you became a Christian.)*

Date you would like your child(ren) to be baptized? \_\_\_\_\_

Service: (circle)

10:00

***Please complete information on back:***

## Infant/Child Baptism Inquiry Form

List any next-of-kin affiliated with Community of Hope:

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

### For Office Use Only:

#### When this form is turned in:

- \_\_\_\_\_ Has the date/service been entered into Dale's Palm with a 2 day alarm?
- \_\_\_\_\_ Has the certificate been processed, and packed for the High School?
- \_\_\_\_\_ Has a photographer been assigned?
- \_\_\_\_\_ Has a the information been given to Communications Team for the Worship Folder?

#### Following the Baptism:

- \_\_\_\_\_ Has the congratulatory letter been mailed?
- \_\_\_\_\_ Is the framed picture in the Welcome Center?
- \_\_\_\_\_ File this form for future reference.