**Baptism/Confirmation Form**

*Please fill out, sign and submit to the secretary of our church via hardcopy or email at vashtibadal1@gmail.com*

**Please select your request:**  Infant Baptism  Adult Baptism  Confirmation

**Name of child or person:** First Name Last Name

**Date of Birth:** dd/MM/yyyy

**Place of Birth:** Enter place of birth

**Father’s Name:** First Name Last Name

**Mother’s Name:** First Name Last Name

**Mother’s Maiden Name**: Maiden Name

**Present Address of Candidate or Family:** Enter your address

**Telephone/Mobile Number:** 1 (868) Enter phone number

**Signatures of Approval**

Print Name: First Name Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Adult Candidate

Print Name: First Name Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Father (for Infant Baptism)

Print Name: First Name Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Mother (for Infant Baptism)

Print Name: First Name Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Sponsor (for Infant Baptism)

Print Name: First Name Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Minister

Date on which Sacrament will be performed: dd/MM/yyyy

**Scripture References – To be read by Parents or Candidate**

Ephesians 6:6 | Proverbs 13:24 | 1st Timothy 3:4 | Deuteronomy 6:4 | Titus 2:4