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...Located in the **HEART** of Carolina Forest!

INFANT BAPTISM REQUEST FORM

Date Submitted _____

Father's Full Name _____

Mother's Full Name _____

Child's Legal Name _____

Preferred Name _____

Address _____

Email _____

Home Phone _____ Cell _____

Date of Birth _____

Siblings _____

Grandparent(s) _____

Sponsors / God Parents _____

Preferred date(s) for scheduling Baptism _____

Date of Baptism _____

Place of Baptism _____

Officiating Minister _____

Date of Request _____

Session Action _____ Date _____