

CHILD BAPTISM/CHILD DEDICATION **INFORMATION SHEET**

Please **PRINT** clearly in ink. Form must be **completed** and returned to Omi Diaz or Elena Sabido at the Reception Desk. For further inquiries, contact Omi Diaz at 812-6062 ext 205 or email: omi.diaz@unionchurch.ph

Child's full name:

(first) (middle) (last)
Note: Full name as indicated on his/her Birth Certificate

Male Female Age: yrs./mos. _____

Country & Place of Birth: _____

Birth Date: _____

Preferred date of scheduled baptism at UCM: _____

Parent/s:

Father's Full Name:

(first) (middle) (last)

Mother's Full Name:

(first) (middle) (last)

Address:

Home Phone: _____ Mobile Phone: _____

Office Phone: _____

E-mail address: _____
(Important to write your email address legibly in order to reach you.)

Church membership of father: _____

Church membership of mother: _____

Worship service (please check which service you attend)

8:30 a.m. 10:30 a.m. 12:30 p.m.

____ Member _____ Regular Attendee

Please CHECK any preference for Pastor to officiate your child baptism/child dedication:

[] No preference (whoever is doing the baptism)

[] Pastor Steve Ruetschle

[] Pastor Charlie Pridmore

Please check your preference:

Water Baptism (Sprinkling) Dedication

Optional

Please provide a **LIFE VERSE** if you have chosen one for your child.

Please provide the **meaning of your child's name** or any other information that will help **personalize** the Baptism/Dedication.

Note: Parents must attend the Baptism Class prior to their child's baptism.

I/we plan to attend the Baptism Class scheduled on _____



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