***Swiss United Church of Christ***

**Baptism Form**

*Please complete and return this form to the church office via email.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Service Information** | | | |
|  | 9:00am *Swiss Church*  Other: |  |  |
| **Date of service** | **Time** |  | **Number of invited guests** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child Information** | | | | | |
|  | | | |  | Male  Female |
| **Child's Name** *(first, middle, last)* | | | |  | **Gender** |
|  |  |  | | | |
| **Date of Birth** |  | **Place of Birth** *(city, state)* | | | |
|  | | |  |  | |
| **Street Address** | | |  | **City, State, Zip** | |

|  |  |  |
| --- | --- | --- |
| **Family Information** | | |
|  |  | ( ) |
| **Parent Name** *(first & last)* |  | **Phone Number** |
|  |  |  |
| **Church Affiliation** |  | **Email Address** |
|  |  |  |
|  |  | ( ) |
| **Parent Name** *(first & last)* |  | **Phone Number** |
|  |  |  |
| **Church Affiliation** |  | **Email Address** |
|  |  |  |
|  | | |
| **Siblings** *(names & ages, if applicable)* | | |

|  |  |  |
| --- | --- | --- |
| **Godparent / Sponsor Information** | | |
| Are you choosing to have godparents or sponsors?  Godparents  Sponsors | | |
|  |  |  |
| **Person 1: Name** | **Person 2: Name** *(if applicable)* |
|  |  |
| **Church Affiliation** | **Church Affiliation** |