



First Congregational Church
608 E. William Street
Ann Arbor, MI 48104-2420
734-662-1679

Baptismal Record

Male Female

Person to be Baptized: _____
(First Name) (Middle Name 1) (Middle Name 2) (Last Name)

Date of Birth: _____ **Place of Birth:** _____

Ceremony Information

Date of Baptism: _____ **Baptized by:** _____

Time of Baptism: _____ **Where Baptized:** _____

Certificate & Bible Information

Mother's Name: _____
(Maiden Name)

Father's Name: _____
(First Name) (Middle Name 1) (Middle Name 2) (Last Name)

Sibling's Name & Age: _____

God Parent/Sponsor Name: _____

God Parent/Sponsor Name: _____
(First Name) (Last Name) (Relationship to Child)

General Information

Contact Person: _____

Address: _____

Phone Number: _____ **E-Mail:** _____

Additional Comments: _____

Information Taken By: _____ **Date:** _____

- | | | | |
|------------------------------------|--------------------------|----------------------------|--------------------------|
| Checked with Minister's Calendars? | <input type="checkbox"/> | Single White Rose Ordered? | <input type="checkbox"/> |
| Entered on Church Calendar? | <input type="checkbox"/> | Certificate Done? | <input type="checkbox"/> |
| Baptism Brochure Mailed? | <input type="checkbox"/> | Bible Done? | <input type="checkbox"/> |
| Deacons Notified? | <input type="checkbox"/> | Entered into ACS? | <input type="checkbox"/> |
| Spelling Checked? | <input type="checkbox"/> | | |