

# APPLICATION FOR HOLY BAPTISM

ST. COLUMBA'S EPISCOPAL CHURCH  
WASHINGTON, DC

**(Form must be returned six weeks before date of baptism)**

Baptism date & time requested: \_\_\_\_\_

(Check one:) Nave /Time GH/Time

Candidate's full name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

City, state & country of birth: \_\_\_\_\_

Parents' full names for recording purposes (Please use mother's maiden name):

Parent 1: \_\_\_\_\_

Parent 2: \_\_\_\_\_

• *If candidate is a child:*

First Parent's phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_

Second Parent's phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_

First Parent's religious affiliation: \_\_\_\_\_

Second Parent's religious affiliation: \_\_\_\_\_

• *If candidate is an adult, phone numbers:* (h) \_\_\_\_\_ (w) \_\_\_\_\_

Sponsors (God parents): \_\_\_\_\_

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Christian Denomination: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Christian Denomination: \_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Christian Denomination: \_\_\_\_\_