

Assumption Greek Orthodox Church Baptismal Information Form

(Please Print Clearly)

Date & Time of Baptism:

Date	Time
------	------

Father's Information:

Name:

First	Middle	Last
-------	--------	------

Current Residence

Address	City	State	Zip
---------	------	-------	-----

Place of Birth

City	State	Country
------	-------	---------

Religious Information

Religion	Parish
----------	--------

Contact Information

Home	Work	Cell	E-mail Address
------	------	------	----------------

Mother's Information:

Name:

First	Middle	Maiden Name
-------	--------	-------------

Current Residence

Address	City	State	Zip
---------	------	-------	-----

Place of Birth

City	State	Country
------	-------	---------

Religious Information

Religion	Parish
----------	--------

Contact Information

Home	Work	Cell	E-mail Address
------	------	------	----------------

Child's Information:

Baptismal Name:

--

Legal Name (If Different):

First	Middle	Last
-------	--------	------

Place of Birth

City	State	Country
------	-------	---------

Date of Birth

Month	Day	Year
-------	-----	------

Godparent's Information:

Name:

First	Middle	Last
-------	--------	------

Orthodox? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Married, name of the church and who performed the marriage?	If Divorced, was the divorce Ecclesiastical?
--	--	--

Address & Contact Information

Address	City	State	Zip
---------	------	-------	-----

Home	Work	Cell	E-mail Address
------	------	------	----------------

Other Pertinent Information:

Parents Wedding Date	Place of Baptism Reception	Has godparent submitted pledge card or letter in good standing from his/her parish? <input type="checkbox"/> Yes <input type="checkbox"/> No
Place of Parents Wedding (Church/City)	Is the godparent an Orthodox Christian in good standing with the Greek Orthodox Archdiocese of America (if in doubt discuss with priests)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Clergyman that Conducted Wedding	Have the parents submitted a pledge card? <input type="checkbox"/> Yes <input type="checkbox"/> No	Approximate Number Attending Baptism:
Comments:		