



# St. John's Anglican Church

42 South Street | Port Hope, Ontario | L1A 1R8 | (905) 885-2171 [www.stjohnschurchph.ca](http://www.stjohnschurchph.ca) | Fax: (905) 885-7592

## Application for the Sacrament of Holy Baptism

Family Name \_\_\_\_\_

Address \_\_\_\_\_

Names of Candidate: \_\_\_\_\_

Phone # \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth \_\_\_\_\_

Names of Father: \_\_\_\_\_

Names of Mother \_\_\_\_\_

(including Maiden Name)

Names of Godparents or Sponsors

Addresses

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

4) \_\_\_\_\_

\_\_\_\_\_

**RESERVED FOR CHURCH USE:**

Date of Baptism: \_\_\_\_\_

Details Entered in Parish Record: \_\_\_\_\_

Other Comments: \_\_\_\_\_

Applications should be completed and submitted to the Rector as soon as possible after the birth of the child.

Arrangements for Adult Baptisms should be made directly with the Rector.