

APPLICATION FOR BAPTISM/BLESSING WOODLAWN UNITED CHURCH

54 Woodlawn Rd, Dartmouth, NS B2W 2S1 902-434-8302 office@woodlawnunited.ca

SEEKING:	Baptism or Blessing (pick one)	DATE OF APPLICATION:			
ABOUT YOUR CHILD (please PRINT)					
SURNAME:		ALL GIVEN NAMES			
BIRTH DATE:		PLACE OF BIRTH:			
GENDER:		PERMISSION TO PRINT NAME IN BULLETIN:		Yes or No	
HOME MAILING ADDRESS					
ABOUT THE PARENT(S)/GUARDIAN(S) (please PRINT)					
PARENT ONE'S FULL NAME:					
HAS PARENT ONE BEEN BAPTIZED/CONFIRMED	Baptized: Yes or No If so where:		Confirmed: Yes or No If so where:		
PARENT ONE's TELEPHONE #s					
PARENT ONE'S E-MAIL					
PARENT TWO'S FULL NAME:					
HAS PARENT TWO BEEN BAPTIZED/CONFIRMED	Baptized: Yes If so where:	or No	Confirmed: Yes or No If so where:		
PARENT TWO's TELEPHONE #s					
PARENT TWO'S EMAIL					

	NAME & AGE		RELATIONSHIP	
OTHER MEMBERS OF HOUSEHOLD (please give ages of other children)				
Why are you seeking Baptism/Blessing For your child?				
If you are seeking baptism, how are you presently involved as "a member in good standing" at WUC?				
If you are seeking Bapt not part of the WUC, in will your child be parti learn in th	which congregation cipating to grow and	nich congregation ating to grow and		
BAPTISM: Except in extraordinary circumstances, we have set dates for Baptism. In which month were you hoping to have your child Baptized?		BLESSING: Are you requesting a private service in our chapel or a public service during Baptism Sunday? In which month were you hoping to have your child Blessed?	Private or Public	
_		al/Blessing material and be at Woodlawn United Churci		
Parent of Child{ren}		Parent of Child{ren}		
We the undersigned have re option	,	Rlessing material and would Be d at Woodlawn United Ch	-	
Parent of Child{ren}		Parent of Child{ren}		