

First Congregational Church
One Walton Place, Stamford, CT 06901
Tel: 203-323-0200, Fax: (203) 348-2270
fccstamford@gmail.com, www.fccstamford@gmail.com

BAPTISM INFORMATION FORM

*Date Requested: _____ Time Requested: _____

Child's Information

First Name: _____ Middle Name: _____ Last Name: _____

Birth Date: _____ City/State of Birth: _____

Parent's Information

Parent's Name: _____ Member of FCC: _____

Baptized, Yes / No: _____ Church Affiliation: _____

Parent's Name: _____ Member of FCC: _____

Baptized, Yes / No: _____ Church Affiliation: _____

Address: _____ City, State, Zip: _____

Contact Information

Parent's Phone(s): Home: _____ Cell: _____ Work: _____

Parent's Email Address: _____

Parent's Phone(s): Home: _____ Cell: _____ Work: _____

Parent's Email Address: _____

Family Information

Sibling(s) Name	Age:	Sibling(s) Name	Age:
_____	_____	_____	_____
_____	_____	_____	_____

Sponsors/Godparents Names:

Grandparents: Maternal:	Paternal:
_____	_____
_____	_____

Great Grandparents: Maternal:	Paternal:
_____	_____
_____	_____

Parent's Signature(s): _____

Printed Name(s): _____