

Date of Baptism: _____

**ST. ANDREW'S EPISCOPAL CHURCH
17 CHURCH ST.
HANOVER, MA 02339-2315
(781) 826-2062**

**HOLY BAPTISM APPLICATION
(Please print clearly)**

FULL NAME: _____

SEX: _____ DATE OF BIRTH: _____

PLACE OF BIRTH (City or Town): _____

STREET: _____

TOWN: _____ STATE: _____ ZIP: _____

FATHER'S FULL NAME: _____

MOTHER'S FULL NAME: _____

PARENTS' ADDRESS (if different): _____

TELEPHONE
HOME: _____ CELL: _____ OTHER: _____

E-MAIL ADDRESS: _____

RELIGIOUS AFFILIATION OF PARENTS: FATHER: _____

MOTHER: _____

WITNESSES OR SPONSORS:

1. NAME: _____

ADDRESS: _____

Baptized

Confirmed

2. NAME: _____

ADDRESS: _____

Baptized

Confirmed

3. NAME: _____

ADDRESS: _____

Baptized

Confirmed

Holy Baptism is especially appropriate at the Easter Vigil, on the Day of Pentecost, on All Saints' Day or the Sunday after All Saints' Day, and on the Feast of the Baptism of our Lord (the First Sunday after the Epiphany)... or when a bishop is present." (Book of Common Prayer, page 312) Alternate dates may be possible due to pastoral needs by speaking with the priest.

**PLEASE RETURN THIS FULLY-COMPLETED APPLICATION TO THE CHURCH OFFICE BY MAIL OR EMAIL.
NOTE THAT THE DATE OF THE BAPTISM WILL NOT BE CONFIRMED UNTIL THIS FORM IS RETURNED.**