

CHRISTENING INFORMATION SHEET

Date Scheduled: _____ Meeting with Pastor: _____

Mother's Name: _____
Last First Middle Initial

Mother's Phone Number: _____

Father's Name: _____
Last First Middle Initial

Father's Phone Number: _____

1. Child's Name: _____
Last First Middle Initial

Child Date of Birth: _____

God Mother: _____
Last First Middle Initial

God Father: _____
Last First Middle Initial

God Mother: _____
Last First Middle Initial

God Father: _____
Last First Middle Initial