

Information Blank

Holy Baptism

Date of Application: ____/____/____

Full Name: _____ Sex: _____

Residence: _____ Age: _____

Father's Full Name: _____

Mother's Maiden Name: _____

Parent's Residence: _____

E-Mail: _____

Parent's Telephone: _____

Religious Affiliation of Parents: _____

Witnesses
or
Sponsors

- | |
|------------------------------|
| 1. _____
Residence: _____ |
| 2. _____
Residence: _____ |
| 3. _____
Residence: _____ |

Date of Birth: _____

Place of Birth: _____

Date of Baptism: _____

Place of Baptism: St. James Episcopal Church; Greeneville, TN

Officiant: The Rev. Kenneth H. Saunders III