



Christ Episcopal Church

321 West Avenue
Red Wing, MN 55066
651-388-0411

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Website: christchurchredwing.com

REQUEST FOR BAPTISM

(Please Print)

CANDIDATE INFORMATION:

Full Name of Person presented for/seeking Baptism _____

To be filled out by adult candidate or parents of minors:

Address _____ City _____ State _____ Zip Code _____

Home Phone# _____ Work Phone # _____

Email Address _____ Cell Phone # _____

Date of Birth _____ City and State _____

Date of Baptismal Instruction _____ Time _____

Date of Baptism _____ Time _____

PARENT INFORMATION:

Father's full Name _____ Denomination/Religion _____

Mother's Full Name _____ Denomination/Religion _____

SPONSOR INFORMATION:

Sponsor(s) _____

(Must be a practicing Christian 16 years of age or older)