



Baptism Data Form

Child's Full Name: _____

Date of Birth: _____

Place of Birth: _____

Father's Full Name: _____

Mother's Full Name (including maiden name): _____

Address: _____

Home Phone: _____

Work Phone: _____

Date of Baptism: _____

Godfather's Name: _____

Godmother's Name: _____

How Many Pews Would You Like Reserved: _____

Comments:

Please Return to:
First Congregational UCC
31 W. Milwaukee Ave.
Ft Atkinson, WI 53538
FAX: (920) 563-9958