



## **BAPTISMAL INFORMATION FORM**

St. Paul's Episcopal Church

576 Roscoe Road • Newnan, Georgia 30263

Phone 770.253.4264 • Fax 770.253.1871 • admin@stpaulsnewnan.org

Today's Date: \_\_\_\_\_

Desired Baptismal Date: \_\_\_\_\_

Person to be Baptized:

\_\_\_\_\_  
Name (First, Middle, Last)

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Place of Birth

\_\_\_\_\_  
Father's full name

\_\_\_\_\_  
Mother's full name

\_\_\_\_\_  
Parents' or Guardian's Address and Phone Number/Email

\_\_\_\_\_  
First Sponsor's full name

\_\_\_\_\_  
First Sponsor's Address

\_\_\_\_\_  
Second Sponsor's full name

\_\_\_\_\_  
Second Sponsor's Address

\_\_\_\_\_  
Third Sponsor's full name

\_\_\_\_\_  
Third Sponsor's Address

Please return to the parish office by email, fax or mail a minimum of 10 days before Baptism date.  
Thank you!