

# St Andrew's Church, Randburg

## **APPLICATION FOR INFANT BAPTISM**

## **Please Print Clearly**

First Name	e/s of Child:					
Please sta	te Boy or Girl:					
Surname c	of Child:		Date of Birth:			
Father:	First Name(s)					
	Surname:					
Mother:	First Name(s)					
Occupation						
Occupation	n of Mother					
Residentia	I Address					
Postal Address			Post Code			
Cell No. Father		_ Mother _				
E-mail Add	dress:					
Full names	s and dates of birth of other children:					
•	·	Yes No	. ,			
If "Yes", at	which Church?					
GODPARE	ENTS (Please give first name & surna	ame and ch	urch denomination)			
	(See overleaf for	declaration	of parents)			

BAPTISM DATE: BAF	PTISED BY
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### **DECLARATION OF PARENTS**

### I DECLARE THAT

		Moth	er	Father	
	(Please tick the appropriate be	ox) Yes	No	Yes	No
1. I be	elieve in Jesus Christ and hope to follow him				
2. I ar	m a regular worshipper				
3. I ar	m a communicant				
4. I ha	ave been confirmed				
-	Denomination (Anglican/Methodist etc)				
-	I would like to be prepared for confirmation				
coul	reparation for our responsibility toward our child, we rese as provided by the Church.  by understand that in bringing my child for Baptism, I the sibility of doing everything in my power to:		·		
*	Instruct my child in the Christian faith				
*	Teach him/her the elements of prayer.				
*	Encourage him/her by my own example to participat and be aware of belonging to it.	e in the life a	and wor	ship of the chu	rch
*	Help him/her to follow Jesus Christ.				
Father	Mother				
Date _					