Malankara Mar Thoma Syrian Church

Application for Baptism

			No:
Name of the Child/ Person to be			
Baptized (in Capital Letters)			
Place of Birth of the Child			
Gender			
Date of Birth	Year:	Month:	Day:
Name of Parents	Father: Mother:		
Address of Parents			
Present Parish			
Home Parish			
Name and Address of God-parent			
Denomination of God-parent			
I request you to baptize my child/myse on	••••		
Place:			
Date:		Signa	ature of Parent/ Self