



Sacrament of Holy Baptism Information Form

Please complete this form and return it to St. Andrew's Episcopal Church, 335 Longmeadow Street, Longmeadow, MA 01106.

Today's Date: _____

FULL Name of Baptismal Candidate

Date of Birth: _____ Place of Birth: _____

Address – Street/City/State/Zip:

Home Phone: _____ Cell: _____

Email: _____

Parent/Guardian Names (if applicable):

Sponsor's FULL Name:

Sponsor's FULL Name:

Date and Service Time of Baptism: _____

Officiant: _____

NOTES: