



## **BABY DEDICATION APPLICATION**

*Congratulations! We are so pleased to welcome your precious child into the Kingdom of God. Please fill out the following form to have your child dedicated to the Lord at our next baby dedication.*

### **FAMILY INFORMATION:**

*(Please print legibly.)*

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_ Is your child a boy or a girl? \_\_\_\_\_

Are you a member of New Life?  Yes  No

Will you be having anyone else stand with you at the baby dedication?  Yes  No

If yes, how many people? \_\_\_\_\_

### **CONTACT INFORMATION:**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **SIGNATURE**

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date

*Please return the completed form to the church office 2 weeks prior to the baby dedication.*