

St. Mark's Episcopal Church
1430 Park Avenue, Plainfield, NJ 07060
www.stmarksplainfield.org

Phone: 908-754-9483
Fax: 908-754-3723
Email: stmarksplainfield@gmail.com

Guidelines for planning your baptism at St. Mark's

- Contact the church office 4 weeks before the desired baptism date to arrange a meeting with the Rector and schedule the baptism.
- Complete the attached form and return it to the office by mail, by fax or in person at least 2 weeks before the baptism.
- The family and godparents should arrive 30 minutes before the beginning of the service on the day of the baptism. Seats will be reserved at the front of the church for family and friends.
- There is no fee for baptisms at St. Mark's. Family and friends are invited to make donations to the church in honor of the person being received into the Body of Christ. Checks should be made payable to *St. Mark's Church*.

Baptism Application Form

PLEASE PRINT CLEARLY.

DATE OF APPLICATION: _____, 20____

CANDIDATE'S FULL NAME _____ Sex: _____
First name, Middle name(s), Last name M/F

DATE OF BIRTH _____ AGE: _____ PLACE OF BIRTH _____
City, State

PARENTS

MOTHER'S NAME _____ FATHER'S NAME _____
First & last name First & last name

STREET ADDRESS _____ CITY/STATE/ZIP _____

PHONE (day) _____ PHONE (evening) _____ RELIGIOUS AFFILIATION _____

SPONSORS OR GODPARENTS

1. NAME _____ ADDRESS _____

2. NAME _____ ADDRESS _____

3. NAME _____ ADDRESS _____

4. NAME _____ ADDRESS _____

PROPOSED DATE OF BAPTISM _____ TIME _____

OFFICIANT _____