

# BAPTISMAL CERTIFICATE FORM

Fees: Each Baptismal Certificate is \$10 duplicates are \$3. Please fill out the form below.  
*(Please print clearly)*

Number of Baptismal Certificates in this order \_\_\_\_\_

Name \_\_\_\_\_

Date of Live Birth \_\_\_\_\_

Born Wombman/Man \_\_\_\_\_

Time of Live Birth \_\_\_\_\_

Weight at time of Live Birth \_\_\_\_\_ pounds \_\_\_\_\_ ounces

County/City/State of Live Birth \_\_\_\_\_

Mother's Name (mother's maiden) \_\_\_\_\_

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