



BETHLEHEM PUNJABI CHURCH

87-47, 111th Street
Richmond Hill, NY 11418
Rev. Jatinder P. Gill, Pastor



APPLICATION FOR
BABY DEDICATION

Name of child _____

Child's Date of Birth _____

(Child must be 2 years old and under to be eligible for dedication)

Child's sex: _____ Male _____ Female

Hospital child was born in: _____

Location of hospital: _____

Child's home address: _____

City _____ State _____ Zip Code _____

Home Phone Number: () _____

Father's name _____

Is the father a born-again Christian? _____ Yes _____ No

Mother's name _____

Is the mother a born-again Christian? _____ Yes _____ No

Will both parents be present for the dedication? _____ Yes _____ No

We have read the booklet explaining the purpose of child dedications, and we want our child to be raised to serve the Lord Jesus Christ.



Father's Signature

Mother's Signature

Date