



The Cathedral
Church of **Saint John**
the Divine

Application for Baptism

Date

Full Name of Person to be Considered for Baptism

Gender

Date of Birth

Connection to the Episcopal Cathedral of St. John the Divine in New York City

Please indicate whether family has membership in the Episcopal Congregation of Saint Saviour

Father's Full Name

Mother's Full Name

Religious Affiliation

Father

Mother

Best Phone Numbers

Day

Evening

Best Mailing Address

E-mail Address

Please understand that this is an application to determine the appropriateness of the individual's Baptism at the Episcopal Cathedral of St. John the Divine. Once we have received your application, we will be in contact with you.

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