

Grace United Church

120 Pine Street
Gananoque, Ontario
K7C 1C7

Phone: 613-382-2161 – Fax: 613-382-2162
grace.gan@outlook.com



Child's Full Name: _____ M / F

Date of Birth: _____

Place of Birth: _____

Father's Name: _____ Church member

Mother's Maiden Name: _____ Church member

Date of Marriage: _____

Address: _____

Phone #: _____ Work #: _____

Date of Baptism: *TBD* _____ Confirmed:

Place of Baptism: _____

Rehearsal Date: _____ Time: _____ Confirmed:

God Parents: 1) Name(s) _____

Address _____

2) Name(s) _____

Address _____

Certificates Completed: (Office Use)

Church Baptism Record

Personal Baptism Record

Cradle Roll Record

Official Board Notified

Church Secretary Notified

Visitation Binder Updated

Date Approved: _____