

Northway Christian Family Church
Child Dedication

Please print

Child(ren)'s Full Name(s)	Date of Birth	Male/Female
1. _____		<input type="checkbox"/> M <input type="checkbox"/> F
2. _____		<input type="checkbox"/> M <input type="checkbox"/> F

Family Information

Mother's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Father's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Please fill in the appropriate responses.	Mother	Father
Have you asked Jesus to be your Lord?		
Are you a member of Northway Christian Family Church?		
Do you desire to raise your child according to the Bible?		

Please Note:

- ❖ Return this application to the Welcome Table.
- ❖ You need to meet with Pastor John the week before the dedication for a brief class. (You will be contacted to schedule the brief class and the Dedication.)

I/We understand that I/we must attend a brief baby dedication class on the meaning of dedicating my/our child(ren) and my/our responsibility as a Christian parent.

Mother's Signature _____

Father's Signature _____