



THE CHURCH OF THE TRANSFIGURATION

12219 SOUTH 86TH AVENUE
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(708) 448-1200 ✉ (708) 448-3921 (fax)
WWW.TRANSFIGPALOS.ORG

Application for Holy Baptism

Revised April 27, 2004

To schedule Holy Baptism at the Church of the Transfiguration, please complete this form and return it to the parish office at least 30 days before the anticipated date of Baptism. A member of the clergy will contact you to confirm the arrangements.

Full Name of the Candidate, including middle name

Male Female

Parent or Guardian's Full Name (children only)

Parent or Guardian's Full Name (children only)

Parent or Guardian's Full Name (children only)

Sponsor or Godparent's Full Name

Sponsor or Godparent's Full Name

Sponsor or Godparent's Full Name

Date and City of Candidate's Birth

Desired Date and Time of Baptism

Contact Person's Name

Contact Person's Street Address

Contact Person's City, State, and ZIP Code

Contact Person's Telephone Number

Contact Person's E-Mail Address