East Leesville Baptist Church

Parent/Child Dedication Form

Parent(s) Information (Please print below) Father's Name Mother's Name Address City State **Phone Number** Zip Code Child's Information First Name Middle Name Last Name Generation (Jr., Sr., II, etc.) Date of Birth Gender: Male Female By signing below, I testify that I am Born-again and I will, to the best of my ability and with God's help, lead a Godly life before my child/children.

Date

Mother's Signature

Date

Father's Signature