



BAPTISM FORM

METROPOLIS OF SAN FRANCISCO
ST. GEORGE GREEK ORTHODOX CHURCH
10830 DOWNEY AVE
DOWNEY, CA 90241



Child

Adult

First Name _____ Middle Name(s) _____

Last Name _____ (as it appears in the Birth Certificate)

Father's Name _____

Mother's Name _____

Born In _____ On _____

(City and State, Country if other than U.S.)

(Month, Day, Year)

With Sponsor(s) _____

(Sponsor's Name/s)

Letter of Good Standing

(Parent's Signature)