



# HOLY FAMILY

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## CHRISTIAN WITNESS ELIGIBILITY STATEMENT FOR BAPTISM

Name of person to be baptized: \_\_\_\_\_

### *To be completed by Christian Witness*

By initialing below, I certify that the following statements are true:

\_\_\_\_\_ I am a baptized and currently practicing Christian

\_\_\_\_\_ I am at least 16 years of age

\_\_\_\_\_ I am not the mother or father of the one to be baptized

\_\_\_\_\_ I am a registered member of my Church

\_\_\_\_\_ I regularly attend Sunday services

Witness name (please print): \_\_\_\_\_

Signature of Witness: \_\_\_\_\_ Date: \_\_\_\_\_

Christian Denomination: \_\_\_\_\_

Name and address of my Church: \_\_\_\_\_

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