



**CORNERSTONE CHURCH
BABY DEDICATION
REQUEST FORM**

Please complete the following request form to have your child dedicated to the Lord. Thank you!

Name of Parents: _____

Address: _____

City/Town: _____

State: _____ **Zip:** _____

Telephone # : _____

Child's Full Given Name:

(1) _____

(2) _____

Child's Gender: Male _____ Female _____

Child's Date of Birth: (1) ____/____/____ (2) ____/____/____

Child's Place of Birth: (1) _____

(2) _____

For Office Use Only:

Approved: _____/____/____

Date of Dedication: _____/____/____

Certificate Sent: _____/____/____

**Train up a child in the way he should go,
and even when he is old, he will not depart from it.”
Proverbs 22:6**