

CHILD DEDICATION INFORMATION

Parent's Names: _____

Date of Birth: _____

Child(ren) to be dedicated: _____

Name child(ren) will be called: _____

Special Verse: *(Please give either reference and preferred version or the specific portion of the verse you wish to have displayed.)*

Vision for Child:

Name Significance:

Special notes of interest:

Phone #: _____

Service you will be attending: 8:30 ____ 10:45 ____ 5:30 ____

SG Leader _____

Please complete this form and return to Sheron at sheronw@nhcconline.com with a picture of your child. Thank you!