



**INTERNATIONAL CENTRAL GOSPEL CHURCH**  
**DOMINION TEMPLE FORM**

**Naming/Christening Form**

**Fill form with clear prints. Form must be filled By Head of Family.**

Date intending to have ceremony (mm/dd/yy): \_\_\_\_\_  
(Dedications are held the third Sunday of the month)

Is The Father a Member of ICGC-Dominion Temple?  Yes  No (tick applicable box)

If no, name of Church: \_\_\_\_\_

When Father became member of ICGC-Dominion Temple: \_\_\_\_\_

Is The Mother a Member of ICGC-Dominion Temple?  Yes  No

If no, name of Church: \_\_\_\_\_

When Mother became member of ICGC-Dominion Temple: \_\_\_\_\_

Name of Baby: \_\_\_\_\_

Date of Birth (mm/dd/yy): \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Name of Father: \_\_\_\_\_

Fathers Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cel: \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Fathers Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cel: \_\_\_\_\_

Marital status of Parents: Married  Separated  Divorced

Parent(s) Signature(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

By signing this form, you promise to raise the child up in the fear of the Lord Jesus Christ by taking him/her to church regularly, nurture and train the child in the way he/she should go in accordance with The Holy Scriptures?

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Office use only

Officiating Pastor's Signature: \_\_\_\_\_

Date (mm/dd/yy): \_\_\_\_\_