



6528 Hamilton Boulevard
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INFANT or CHILD DEDICATION

Child's Full Name: _____ Male or Female

Date of Birth: _____ Place of Birth: _____

Father's Full Name: _____
First Middle Last

Mother's Full Name: _____
First Middle Maiden Last

Are you members of Faith Church? Yes No

If not members, please give a brief description of your church background and your relationship with the Lord:

Have you had any other children dedicated at Faith Church? _____

Parents' Address:
Street _____
City _____ State _____ Zip _____
Telephone # _____

Date of Dedication: _____

Please indicate which service you prefer:
 9:00 AM SANCTURARY - OR - 10:45 AM FLC