

Baby Dedication Form

Pre-requisites for Baby Dedication:

- 1. One parent must be a born-again Christian and worships regularly at Trinity
- 2. Have undergone an interview with a Pastor / Ministry Leader.

3. Agree to the following Parental Covenant:

PARENTAL COVENANT

As parents, when we present our child for dedication, it not only signifies our faith in Christ and the Christian way of life, but also indicates our desires that our child would grow to be a strong disciple of Jesus Christ.

We realize that presenting a child in dedication to God is a serious matter involving responsibilities. We recognize that the first responsibility is ours and so pledge that:

- *I.* We shall pray for our child's salvation and lead him/her to Christ.
- *II.* We will live an exemplary life before our child, so that he/she may by example know what it is to be a Christian.
- III. We will disciple our child in the Word, in prayer, in worship and in living the Christ-like life.
- IV. We shall ensure that our child is further nurtured in the Word of God and Christian values through the Children and Youth Ministries of Trinity Christian Centre.

Send your completed form to connect@trinity.sg

Parent's Particulars

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Father's Name:		Email:
		Connect Group/Carecell:
Mother's Name:		Email:
		Connect Group/Carecell:
Address:		Postal Code:
We are attending:	□ Trinity Paya Lebar □ □ Trinity	Trinity Adam 🛛 Trinity Choa Chu Kang
Child's Particulars	S	
Child 1		
Full Name (as in N	RIC/FIN/BC):	
Name in Chinese (Character:	
		Gender: 🛛 Male 🛛 Female
Child 2		
Full Name (as in N	RIC/FIN/BC):	
•	Character:	
Date of Birth (dd/mm/yyyy):		Gender: 🛛 Male 🗇 Female

□ I hereby consent to the collection, use, disclosure, and retention of my personal data in accordance with the terms of Trinity's privacy policy (https://chms.trinity.sg/privacy-policy). By providing my contact details, I agree that Trinity and any of your representatives may contact me on any matters relating to Trinity.

For official use only

Date received:	Contacted Parents on:
Interviewer's Name:	Dedicated Date & Time:
Interviewer's Signature:	Approved Not Approved
	Remarks:
Date:	