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**ARMENIAN APOSTOLIC CHURCH OF COLORADO**

Rev. Father Yeremia Khachatryan – Parish Priest

**BAPTISM APPLICATION FORM**

(Please type or print. Return completed application to [armchurchdenver@gmail.com](mailto:armchurchdenver@gmail.com))

For Office Use only: Certificate #  _____
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Date of Baptism \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Time \_\_\_\_\_

Full Name of Baptized (1) \_\_\_\_\_ Date of Birth\_\_\_\_/\_\_\_\_/\_\_\_\_

Full Name of Baptized (2) \_\_\_\_\_ Date of Birth\_\_\_\_/\_\_\_\_/\_\_\_\_

Location of Birth: \_\_\_\_\_ Location of Baptism:  St. Catherine Greek  
 Orthodox Church;  Other location requested (*only with Priest's approval*) \_\_\_\_\_

Officiating Clergy:  Rev. Father Yeremia Khachatryan;  Other Clergy (*only with Priest's approval*)

Language of service:  Armenian;  Russian;  English \_\_\_\_\_

Name of Father: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Mother: \_\_\_\_\_ Phone #: \_\_\_\_\_

Family Address: \_\_\_\_\_

Godfather: \_\_\_\_\_ Godmother: \_\_\_\_\_

*(Godparent must be baptized in the Armenian Apostolic Church)*

Requested by: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Relationship to baptized: \_\_\_\_\_



**DONATIONS FOR BAPTISM**

*(Donations have been suggested and approved by Parish Council 2024)*

Church Service	\$300 for 1 child	
Church Service	\$400 for more than 1 child	
Total		

For Questions, please contact Caroline Younit (303) 917 - 0972  
[www.coloradoarmenianchurch.com](http://www.coloradoarmenianchurch.com) | [armchurchdenver@gmail.com](mailto:armchurchdenver@gmail.com)