



## Baby Certificate Request Form

Please print:

BABY'S NAME: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

PARENTS NAME: \_\_\_\_\_

PRESENTED BY: \_\_\_\_\_

DATE OF PRESENTATION: \_\_\_\_\_

BABY'S NAME: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

PARENTS NAME: \_\_\_\_\_

PRESENTED BY: \_\_\_\_\_

DATE OF PRESENTATION \_\_\_\_\_

BABY'S NAME: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PRESENTED BY: \_\_\_\_\_

DATE OF PRESENTATION: \_\_\_\_\_

BABY'S NAME: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PRESENTED BY: \_\_\_\_\_

DATE OF PRESENTATION: \_\_\_\_\_

BABY'S NAME: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PRESENTED BY: \_\_\_\_\_

DATE OF PRESENTATION: \_\_\_\_\_

Enclosed is a check for \$ \_\_\_\_\_ (\$5.00 per certificate)

Make check payable to Women Ministries, Midwest Conference

Funds from these certificates are given to our Conference Camps.

Mail to; LaDonna Rossander  
Midwest Women Ministries Treasurer  
2915 220<sup>th</sup> St.  
Stanton, IA 51573

Certificates are to be sent to: Name \_\_\_\_\_

Address \_\_\_\_\_