Baptism Information

Name of baptized_____ Male or Female (circle gender)
First Middle Last

Date of Birth _____Place of Birth _____

Date of Baptism_____ Time of Baptism_____

Address of person being baptized_____

_____
City State Zip

Your Email Address _____Telephone #_____

For child being baptized, please provide the following information:

Mother _____

Name Church Membership

_____

Address City State Zip

Father _____

Name Church Membership

_____

Address City State Zip

Sponsor _____

Name Church Membership

_____

Address City State Zip

Sponsor _____

Name Church Membership

_____

Address City State Zip

For adult being baptized: Name of spouse _____

Name of child_____ Age_____

Name of child_____ Age_____

Notes: