

Baptism Information

Today's Date: _____

Date of Baptism: _____ Which service? 8:15 11:00

Full name of person being baptized: _____

Please mark all applicable:

- Male
- Female
- Child
- Adult

Date of Birth & Current Age: _____

Place of Birth (City and State): _____

Father's Name: _____

Mother's Name: _____

Sibling(s)

(Name/Age): _____

Members of Trinity: Yes No

Name of Grandparents: (if attending) _____

Name of Godparents: (if attending) _____

Approximate number of guests: _____

Contact Information:

Mailing Address: _____
(address) (city, state, zip)

Phones: home: _____

Cell: _____

Cell: _____

Email: _____

Email: _____

Other Notes: _____

Office use only:

- Confirmation of date & instructions sent:
- Copies to
 - Officiating pastor, Bulletin, Children's Minister (email), lay leader
 - Quilters (email) Certificate calligrapher (email) Shelby (email)