

## Baptismal Information

Date of Baptism: \_\_\_\_\_ Time of Baptism: \_\_\_\_\_

Name of Baptismal Candidate:

\_\_\_\_\_

First

Middle

Last

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

City

State

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

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Church Membership: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Mother's Church Membership: \_\_\_\_\_

## Sponsors

Name	Church Membership	Relationship
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Name	Church Membership	Relationship
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Name	Church Membership	Relationship
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Name	Church Membership	Relationship
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What is the situation for this baptismal request?

What is the church/faith history of the candidate and/or his/her family?

Reserve pews for family?  Yes  No

How many? \_\_\_\_\_