

Baptism

___ Adult

___ Infant

Please print:

Name: _____
 First Middle Last

Parents' Names:

Father: _____

Mother: _____

Mother's Maiden Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Cell phone #: _____

E-mail: _____

Date of Birth: _____

Place of Birth: _____

Place of Baptism: _____

Date of Baptism: _____

Are sponsors (godparents) to stand with you?

Name: 1) _____ 2) _____

Administering Clergy: _____

Elder: _____
(Church will provide.)