



# Baptism Form

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We look forward to welcoming a member of your family into God's family! We pray that this day will be treasured and remembered as a day of joy. The following steps will help us in the coordination of your baptism:

1. Complete and submit this baptism form to the Pastor you have requested. (If you have no preference, please write "NO PREFERENCE" in the blank and submit the completed form to Pastor Phil.) If email is not available, please return a printed copy to the church office on either campus. Your baptism is not official on the church calendar until this form is received and the date is verified (see below).
2. Request a Baptism Date (below). We'll settle on the date after the request is made.
3. If this is your first baptism, attend a baptism class. Times and dates vary by the month.
4. Inform family and friends of the celebration of baptism day. Invite them to arrive at least 10 minutes prior to the service start. (Take this time to remind siblings of the meaning of baptism. This day is special for them too!)
5. Families are welcome to record the baptism or livestream it with a cellphone discretely if they desire a recording.

Requested Baptism Date: \_\_\_\_\_ Location: \_\_\_\_\_

Service Time: \_\_\_\_\_ Pastor: \_\_\_\_\_

Baptism Class Scheduled for: \_\_\_\_\_ Baptism Class Completed: \_\_\_\_\_

Full name of person to be baptized: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Gender: M M o r F Date of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

Father's Email: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

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

Mother's Email: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Siblings Names and Dates of Birth: \_\_\_\_\_

Sponsor(s) Full Name: \_\_\_\_\_

*(Please list sponsors who are couples together on the same line, i.e. Bob and Jane Smith.)*

Sponsor(s) Full Name: \_\_\_\_\_

Sponsor(s) Full Name: \_\_\_\_\_

Estimated number of seats to reserve: \_\_\_\_\_