

[Church Name] Baptism Request Form

Buried with Him in baptism, wherein also ye are risen with Him through the faith of the operation of God, who hath raised Him from the dead. – Colossians 2:12 (KJV)

Requested Date for Baptism: _____ Service Time: _____

Information of Person to be Baptized	
Full Name	
Sex	
Date of Birth	
City/State of Birth	
Address	
Phone Number	
Email	

Please check the ones that apply:

- I'm a member of [Church Name] and I want to be baptized
- I'm a member of [Church Name] and I want to have my child baptized (Fill out the information below please.)
- I'm not a member of [Church Name] but I want to be baptized – If you're a member at another church, what is the name of your church? _____

Information of Parents if your Child is being Baptized	
Father's Full Name	
Mother's Full Name	
Date of Marriage	
Address	
Phone Number	
Email	
Child's Full Name	
Child's Date of Birth	
City/State of Birth	
Are you a member of [Church Name]?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how long have you been a member: _____

Information of Godparents	
Godfather's Name	
Godmother's Name	

Signature: _____

If under 18 years of age, Signature of Parent: _____

Office Use Only
Date of Baptism Approval: _____
Elder Assisting: _____
Copies To: Requested Pastor Officiating Clergy

Revised: _____