

Baptismal Information Form

Baptismal Candidate Full Name: _____ Child Adult

Date of Birth (month/day/year): _____ Gender _____

City of Birth: _____ State of Birth: _____

Mother's Name: _____ Bethel Member Yes No

Mother's Maiden Name: _____

Father's Name: _____ Bethel Member Yes No

Contact Information:

Address _____

Phone _____

Email _____

Sponsor(s) name(s): _____

First Choice for Baptism Date: _____ Time: _____

Second Choice for Baptism Date: _____ Time: _____

I have a church membership: Yes No

I am a member of _____ church.

Membership information in Realm _____

Pastor to perform Baptism _____ Gave/sent Pr. baptismal Info form on _____

Emailed parent to confirm baptism date on _____

Baptism Certificate for: Parents Sponsors

Gifts Given: Bible (with nameplate) Blanket Cloth for head Candle