

BAPTISM FORM

First/Middle/Last Name _____

Date of Birth _____ Male Female

T-shirt size: _____

Email: _____

Address _____

Phone # _____

(If Under 18 years old)

Father's First/Middle/Last Name _____

Mother's First/Middle/Maiden/Last Name _____

Godparents (if any) _____

Date of Baptism _____

Place of Baptism The Temple

Officiating Pastor Phil Chamberlin Pastor Kurt Ervin

Other _____

(Please check one)

8:45 a.m. Sunday

10:00 a.m. Sunday

11:15 a.m. Sunday

Other