Our Savior's Lutheran Church Baptism Information Form

Name: _____
First **Middle** **Last**

Address: _____

Required Information for Congregational Records

Birth Date: _____ Birth Place: _____

Type of Baptism: Child / Adult (Circle One)

MALE / FEMALE (Circle One)

Father: _____

Member of Our Savior's Lutheran Church? Yes / No (Circle One)

Mother: _____

Mother's Maiden Name: _____

Member of Our Savior's Lutheran Church? Yes / No (Circle One)

Godparents: _____

_____

_____

_____

Baptism Date:_____ **Service:**_____ **Time:**_____

During the Service / After the Service / Before the Service

CERTIFICATE INFORMATION

Parents: Married / Divorced / Deceased _____

How Many Godparent Certificates: _____

Remarks: _____

_____

Rev. 06/07