

Baptism Information (Adult)

(Blue items – for office use)

- Pastor:** Date Confirmed, Consultation Set, Copies Printed & Distributed
Office Manager: Calendar, Make up Certificate, Put Record in Servant Keeper
Custodian: Set out baptistery, fill water bowl

Date of Baptism: _____ **Time of Service** _____ **Minister** _____

Full Name: _____ **Nickname** _____

Birth Date _____ **Born Where: Hosp. / City/ State** _____

Member(s) **Related to a Member** **Non-member(s)**

Home Address

Phone #'s: Home _____

Other phone: Work _____ Cell _____ Fax _____

Spouse Phone: Work _____ Cell _____ Fax _____

Your Email _____ **Spouse's Email** _____

Number of Family & Friends Attending: _____

Children In Family:

Name: _____ Birthday: _____ Grade: _____

Name: _____ Birthday: _____ Grade: _____

Name: _____ Birthday: _____ Grade: _____

Name: _____ Birthday: _____ Grade: _____

Other Notes: _____

Pastoral Consultation Date: _____ **Person Taking Info** _____