



ST. MARK'S LUTHERAN CHURCH

BAPTISM INFORMATION

Name of child: _____
(first) (middle) (last)

Date of Birth: _____ Place of Birth: _____

Mother: _____
(first) (middle) (last)

Father: _____
(first) (middle) (last)

Address: _____ Phone: _____

Mother's Church Affiliation: _____

Father's Church Affiliation: _____

Sponsor: _____

Sponsor: _____

Sponsor: _____

Sponsor: _____

Date of Baptism: _____ Time of Service: _____

Special Notes: _____

