

## Christ Lutheran Church and School Adult Baptism Application

Date requesting for Baptism:	8:15 a.m. □ 11:00 a.m.
PERSONAL INFORMATION	
Full Name:	Male Female
Date of Birth: Pl	ace of Birth:
Marital Status: ☐ Married ☐ Divorced	☐ Single
Church Membership Status: Christ Lutheran Church	☐ Other LCMS ☐ Non LCMS ☐ No Affiliation
Name of Church (If applicable):	City/State:
Father's Full Name:	Mother's Full Maiden Name:
CONTACT INFORMATION	
Address: City/S	State/Zip Code:
Phone: E-mai	il Address:
spiritual care of the Pastor.  I promise to my preserve my relationship with G bible study.	rist Lutheran Church upon baptism and will be under the God by regularly attending church and participating in and with God's help, present a Christian example to others
Signature	Date