

St. Andrews Lutheran Church
Baptismal Application Form

Full given name of child/adult being baptized

Address _____

Telephone _____

Date of Baptism _____ Time of Service _____

Date of Birth _____ Hospital _____

Father's Name _____

Mother's Name _____

Sponsors Names _____

For Office Use:

Baptismal Application Completed _____

Parents attended session with Pastor (date) _____

Baptismal & Sponsor Certificate to Calligrapher _____ Date _____

Who _____ Date _____

Certificates given to family _____ Baptismal Candle _____ Baptismal Napkin _____

Contact Alter Guild to put up Baptismal Banner _____

Lay Minister for service contacted _____ Head Usher contacted _____

Newly baptized assigned to which Lay Minister _____

Cradle Roll Informed (if under 3) _____

New Member Addition

Rolladex ___ Computer ___ Family File ___ Membership List ___ Official Acts Book ___