



# LUTHERAN CHURCH OF THE RESURRECTION

## BAPTISM INFORMATION LUTHERAN CHURCH OF THE RESURRECTION

Name of Child \_\_\_\_\_ M / F

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Father's Name \_\_\_\_\_

First Name

Middle Initial

Last Name

Mother's Name \_\_\_\_\_

First Name

Middle Initial

(Maiden Name)

Last Name

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Other Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Church Membership \_\_\_\_\_

Date of Baptism \_\_\_\_\_

Service: SUNDAY 8:00 a.m. \_\_\_\_\_ 10:00 a.m. \_\_\_\_\_

Sponsors

Church Membership

\_\_\_\_\_

\_\_\_\_\_

Will you allow us to post photos of the baptism on our website/Facebook page? Yes No

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Office Use Only

Before Baptism

Altar Group Called \_\_\_\_\_

Rose ordered \_\_\_\_\_

Deacon Called/emailed \_\_\_\_\_

Certificates created \_\_\_\_\_

Picture for projection emailed to Chuck Petrach \_\_\_\_\_

Certificates & 25 copies of full bulletin to Deacon \_\_\_\_\_

After Baptism

Add to Parish Register Baptism # \_\_\_\_\_ Child Member # \_\_\_\_\_

Add to Shepherd's Staff \_\_\_\_\_

Copy of information sheet & 1/2 page labels to Cradle Roll (Luann Vacek) \_\_\_\_\_