



BAPTISM REQUEST FORM

PARTICIPANT INFORMATION

NAME: AGE:

ADDRESS:

CITY: STATE: ZIP CODE:

PHONE: CELL: OTHER:

E-MAIL:

What was the date (estimate if you aren't sure) that you understood the need to ask God to forgive your sin and invite Jesus into your life?

FOR OFFICE USE ONLY

STAFF NAME: CONTACT DATE:

DOING THE BAPTISM:

RELATIONSHIP TO PARTICIPANT:

PARTICIPANT RECEIVED BAPTISM INFORMATION SHEET: YES NO

PARTICIPANT BAPTISM DATE:

ADDITIONAL COMMENTS: