

BAPTISM INFORMATION SHEET

Epiphany Lutheran Church

268 Hill Road N., Pickerington, OH 43147
614-837-2826 epiphany@epiphany-lutheran.com

Date of Baptism _____

Service Time: 9:00/11:00

FULL NAME OF PERSON TO BE BAPTIZED _____ Male / Female

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-mail _____

Birth Date _____ Birth Hospital (if a child) _____

Birth Hosp. City _____/State _____

PARENT FULL NAME _____

(List parent's address if different from child's)

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-mail _____

PARENT FULL NAME _____

(List address if different from other parent or child's)

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-mail _____

SIBLINGS NAMES _____

SPONSORS 1st Sponsor Name _____

2nd Sponsor Name _____

Are the 2 sponsors a married couple? Yes _____ No _____

How many guests are you expecting to attend?

We will save pews up in front near the baptismal font.

Please note: Please sit in the left front pew near the baptismal font. Flash photography is not permitted during the worship service.

***Office Use Only ***

___Altar Guild ___Minister of Music ___Church Council ___Baptism File ___Main Stats ___Certificate ___Red Book
___Church Windows ___Bulletin ___Pastor's dir. ___Messenger ___Calendar ___Rolodex ___Envelopes