

FIRST LUTHERAN CHURCH
3601 Dakota Avenue
South Sioux City, Nebraska 68776
402/494-5461

DATE OF BAPTISM ___/___/___

TIME OF BAPTISM: 8:15 AM ___ 10:30 AM ___ OTHER ___

NAME OF ONE TO BE BAPTIZED _____
FIRST MIDDLE LAST

BIRTH DATE ___/___/___ BIRTHPLACE _____
CITY STATE

PARENTS:

FATHER'S FULL NAME _____
FIRST MIDDLE LAST

MOTHER'S FULL NAME _____
FIRST MIDDLE LAST (MAIDEN)

ADDRESS _____ PHONE _____

SPONSORS (IF SPONSORS ARE MARRIED, THEY MAY BE PLACED ON THE SAME LINE):

1) NAME _____

ADDRESS _____

2) NAME _____

ADDRESS _____

CONGREGATIONAL SPONSOR:

1) NAME _____

Contacted by Pastor _____

Contacted by Couple _____

Office Use

- ___ Baptismal Candle
- ___ Baptismal Certificate
- ___ Sponsor Certificate
- ___ Recorded in Parish Book
- ___ Parish Sheet typed
- ___ Enter on computer
- ___ Baptismal Napkin
- ___ Cross