



Please fill out completely and return:

1700 Lost Dauphin Rd
De Pere, WI 54115
920-336-1082

pastorcindy@stjohndepere.org

Office use only

Pre-baptismal meeting: _____
 Insert
 sacristy Calendar
 Certificate/book/candle
 entered in SK

St. John Lutheran Church Baptismal Information Form

Baptismal candidate's information:

Full Name _____ Sex M F
 First Middle Last

Date of Birth _____ City of Birth _____

Preferred date of baptism _____

Time 8:00am 9:00 am(Summer only) 10:00 am other _____

Parents Information

Mother

Father

Name: _____
 First Middle Last First Middle Last

Have you been baptized Yes No Have you been baptized Yes No

Member of St John Yes No Member of St. John Yes No

Mother's Maiden name: _____

Home Address: _____

Email: _____

Contact Phone Number: _____

Current Church Membership if not member of SJLC _____ None _____

Sponsors Information:

You need to appoint two sponsors or "Godparents" for your child. They should be people you can trust to support you and your child in his/her faith development, and who will take their promises at baptism seriously. Sponsors must have been baptized.

Name _____ Church Membership _____

Name _____ Church Membership _____