

Classmate Request Form

Name : _____

Name 3 people you want to be in class with:

Baptism Information Form

Year 2011/12

Full Christian Name _____
(First) (Middle) (Last)

Address _____

(City) (Zip Code)

Phone Number _____ Birthdate _____
(Month) (Day) (Year)

Parents' Names _____

Mother's Maiden Name _____

Church Baptized at _____

In _____
(City) (State)

On _____
(Month) (Day) (Year)

If not baptized: Birthplace _____
(County) (City) (State)