

*"The Church With A Heart For The Hurting"*



*True Bethel Baptist Church*

# Baptism Application

Please check which service you usually attend:

7:45       9:30       11:00       12:00 (NF)

**Name PRINT:**

First \_\_\_\_\_ Last \_\_\_\_\_

**Mailing Address:**

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

D.O.B. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parents/Guardian Name: \_\_\_\_\_  
(If under 16)

Contact Person \_\_\_\_\_

Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

**Email Address** \_\_\_\_\_

Date of Baptism \_\_\_\_\_