



609 8<sup>th</sup> Street NW Buffalo, MN 55313

763-682-3538

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## Baptism Registration

Full Name of Child \_\_\_\_\_

Child's Birth Date \_\_\_\_\_

Parent's Full Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Parent's Birth Date \_\_\_\_\_

Parent's Full Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Parent's Date of Birth \_\_\_\_\_

Sibling's Names & Ages \_\_\_\_\_

Date(s) preferred \_\_\_\_\_

Sponsors (not required; maximum 4): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How Many family & friends are expected at the baptism? \_\_\_\_\_

Please return to the church office.

Updated 12/2024

*So All May Know Joy*