

OUR SAVIOR LUTHERAN CHURCH Bettendorf, Iowa

BAPTISM INFORMATION FORM

Full Name of Person to be Baptized		
Date a	nd Place of Birth Male l	Female
Name	of Father	
Name	of Mother (include maiden name)	
Siblin	gs (if applicable)	
Addre	SS	
Phone	Cell Phone E-mail address	
Spons	ors and addresses	
Date o	f Baptism	
Baptis	m Worship Time (circle one): Sat., 5:00 p.m. Sun., 8:00 a.m. Sun., lemorial Day weekend through Labor Day weekend the 10:45 a.m. service is moved to 1	10:45 a.m.*
Signat	ure of Parents	
Please	Check:	
1)	We desire holy baptism for our child because we believe that the LORD Jesus Christ, the Redeemer of the world, ordained Holy Baptism for our salvation.	
2)	We desire that our child remain a member of the kingdom of Christ, both here on earth and throughout eternity.	
3)	To this end we pledge ourselves to give our child a Christian educ home.	ation in our
4)	It is our purpose to assume all the responsibilities of godly parents, home environment and routine, which will be conducive to our chil welfare.	-
5)	We will bring our child to Sunday school regularly.	
6) _	We would like to be notified of your next adult instruction class (E Grace), through which we may be prepared for membership in Lutheran Church.	