

## **Information for Baptism at St. Mark's**

*(Please fill out and return to the church office as soon as you are able to so that the necessary arrangements can be made. God bless your family!)*

*Service Times: Sunday, 8:00 & 10:45 am; Monday, 7:00 pm*

***In obedience to the command of our Lord Jesus Christ, who instituted Baptism, saying in the last chapter of Matthew: "Go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit," this child is being brought for the Sacrament of Holy Baptism.***

**Child's Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Place of Birth (Hospital, City):** \_\_\_\_\_

**Father's First & Last Name:** \_\_\_\_\_

**Mother's First & Maiden Name:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Proposed Date of**  **Baptism**  **Reaffirmation** *(check one):*

**Service Time:** \_\_\_\_\_

**# of Pews to Reserve:** \_\_\_\_\_ *(check one)* **In Front:** \_\_\_\_\_ **In Back:** \_\_\_\_\_

**Witnesses:** \_\_\_\_\_

***I/We understand that through Baptism this child receives the forgiveness of sins and is received into the Christian Church, and also that this child, through Baptism, becomes a baptized member of this congregation.***

***I/We intend to bring up this child in the Christian faith, to remind him/her of this Baptism, to instruct him/her in the truths of God's saving Word, and to make faithful use of the assistance offered by the Church.***

***Signature of Parent(s)/Guardian(s):***

\_\_\_\_\_

*(As the date draws closer, it is a good idea to confirm the day and time.)*

www.StMarksLutheran.com 916-961-7891

7869 Kingswood Drive, Citrus Heights, CA 95610