



Christ the King
Lutheran Church

Baptism Information

Full Name of Baptized: _____

Date of Birth: _____ Date of Baptism: _____

Place of Birth: _____

Home Address: _____

City/State/Zip: _____

Parent Name: _____

Phone: _____

Email: _____

Member of Christ the King? (circle one) YES NO

Parent Name: _____

Phone: _____

Email: _____

Member of Christ the King? (circle one) YES NO

Sponsors/Godparents:

Notes:
