

St. John's Evangelical Lutheran Church and School (LCMS)

9141 County Road 101
Corcoran, MN 55340
763-420-2426 or FAX 763-420-7198

Matthew V. Moss, Pastor
Matthew P. Johnson, Pastor



"Learning and Living as God's Baptized Children"

BAPTISM APPLICATION

DATE: _____

CHILD'S FULL NAME: _____ Male/Female? _____

BIRTHDATE: _____

BIRTHPLACE: (City, State, Hospital) _____

FATHER'S FULL NAME: _____

CHURCH MEMBERSHIP: _____

MOTHER'S FULL NAME: _____

CHURCH MEMBERSHIP: _____

FAMILY ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

EMAIL: _____

LCMS SPONSORS: (Must be LCMS Members; list as desired on certificate) _____

CHURCH MEMBERS AT: _____ CITY: _____

WITNESSES: (optional) _____

PUBLIC SERVICE? _____ PRIVATE SERVICE? _____

DATE/TIME OF BAPTISM SERVICE: _____

OFFICIANT: _____

(Baptism Preparation Checklist – Office Use Only)

___/___/___ Notifications: Worship Assistant/Banner Maker/Altar Guild/Custodian

___ Prepare materials: ___BR, ___Certificates, ___Sponsor Brochures, ___Book Note, ___Candle, ___EO, ___BA, ___GC

___ Scan docs to Shared Files: ___Application

___ Shepherd's Staff database update

___ Red Record Book entry