

CHILD BAPTISMAL RECORD

NEW LIFE LUTHERAN CHURCH
4380 Wakonda Drive
Norwalk, Iowa 50211
285-5965
newlifelutheranoffice@gmail.com
www.newlifenorwalk.org

Child's Full Name: _____

Date of Birth: _____

Place of Birth: _____

Father's Full Name: _____

Member of New Life? Yes No

If not, where? _____

Mother's Full Name: _____

(include maiden name in parenthesis)

Member of New Life? Yes No

If not, where? _____

Sponsors: _____

Are there other children in the family? Yes No

If so, give names and ages: _____

Are they Baptized? _____

Parents' Address: _____

Parents' Phone: _____

Date of Baptism: _____ **Time:** _____

Comments: