



W299 N5782 County Road E, Hartland, WI 53029
(262) 367-6000 oursaviorshartland.org

BAPTISM DATE: _____

Time of Baptism: _____

BAPTISMAL INFORMATION SHEET

Full Name _____

Date of Birth _____

Place of Birth _____

Home Address _____

City, State, ZIP _____

Phone Number _____

E-Mail Address _____

SPONSORS

Name _____

Address _____

City, State, Zip Code _____

Church Affiliation _____

-----*For Church Office Use. Please do not fill out this section. Thank you!*-----

BAPTISMAL CONFERENCE

Date _____

Time _____

Pastor Officiating _____

Additional Information: _____

entered in CMS _____