

Baptism Information Form

**United Lutheran Church
3825 Erie St.
Racine, WI 53402
1-262-639-2038**

Baptism, within the Lutheran Church, signifies many things. First and foremost baptism is a gift from God that washes the baptized from their sins, offering forgiveness. Baptism is also a ritual in which the community welcomes the newly baptized as a member of the Church. During the baptismal service one is marked with the sign of cross on their foreheads with holy water or holy oil; this becomes a permanent symbol that they have received the gift of the Holy Spirit in their lives. In the Lutheran Church there is no age limit on being baptized, infants and elderly may be baptized. If baptized as an infant that child will have an opportunity to affirm their baptism when they are older; to publicly say yes to their faith and affirm the gift of God's presence in their lives. While baptism is a one time event there are many opportunities to remember our baptism. Lutherans do not believe that one needs to be “re-baptized” because God's promise in baptism never fails and never has to be “re-done.”

We give thanks that you are considering baptism at United Lutheran Church. We invite you to fill out the form below and submit it to the church office. The pastor will contact you after receiving this form to confirm the date and time and to set up a time to meet prior to the baptism. If you have any questions please feel free to contact the pastor. Blessings on your journey to baptism and a renewed life in Christ and the church.

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Date of application _____

Date of Baptism _____ Service time _____

Name of Baptismal Candidate _____
(First) (Middle) (Last)

Date of Birth _____

Place of Birth _____
(City) (County) (State) (Hospital)

Mother _____
(First) (Middle) (Last) (Maiden)

Church Membership _____

Father _____
(First) (Middle) (Last)

Church Membership _____

Address _____ Phone _____

E-mail _____

Sponsor(s) _____	Church Membership _____
_____	Church Membership _____
_____	Church Membership _____
_____	Church Membership _____

Notes: