Child's Name: _____ _
First Middle Last

Baptism Information Sheet

Baptisms are scheduled for non-communion services;
Sanctuary on 2nd, 4th & 5th Sundays each month,
Family Life Center on 1st, 3rd and 5th Saturdays

Baptism Date Preferences_____

Please indicate your worship service preferences, if more than one, please note 1st, 2nd, etc.:

Sanctuary Worship Services:
_____ 8 a.m. Traditional
_____ 9:30 a.m. Traditional Blend
_____ 11 a.m. Contemporary

Family Life Center Worship Services:
_____ 5:30 p.m. Saturday
_____ 9:30 a.m. Casual Contemporary Sunday

Birth Date _____ City/State of Birth_____

Father's Name _____

Mother's Name _____Maiden Name _____

Address _____

City _____ State _____ Zip Code _____

Best phone number to reach you during the day _____

E-mail _____

Are parents members of Gloria Dei? Father _____ Mother _____

Sponsors 1. _____
2. _____
3. _____

Number of persons attending (for pew reservation): _____

Would family like front or back / left or right pew (as you face the front)?

_____

**Please send completed form to office@gdlc.church. If you have any questions, please contact the church via e-mail or call 276-1700.

Office Use		Baptsim Video Request Form	
Planning Center		Certificates/Service Folder	
Pastor and Baptism Team		Shepherd's Staff	
Banner		Book of Life/Cradle Roll	
Faith Chest		Reminder e-mail	