



Trinity Evangelical Lutheran Church
328 George St., West Chicago, IL 60185

Application for Baptism – Information Sheet

Full name of person/child to be baptized: _____

Date of birth: _____ Place of birth: _____

Mother's name: _____ Father's name: _____

Address: _____

Phone number: _____ Email address: _____

Preferred date of Baptism: _____ Preferred time of Baptism: _____

Sponsor's name: _____ Sponsor's home church: _____

Sponsor's name: _____ Sponsor's home church: _____

(I/We) agree to nourish this person/child's spiritual growth and encourage active participation in worship, education and life in Christ's Church

Signature of Parents or Baptismal Candidate; _____

"...having been buried with him in baptism, in which you were also raised with him through faith in the powerful working of God, who raised him from the dead." Colossians 2:12