Baptismal Information

Roselle United Methodist Church

206 S. Rush Street, Roselle, IL 60172

(63) 529-1309 www.RoselleUMC.org

Proposed
Baptismal Date: _____

Name: _____
(First) (Middle) (Last)

Place of birth: _____ Birth Date _____/_____/_____
(mm) (dd) (yyyy)

Address: _____
(street) (city) (state) (zip)

Phone: _____
(with area code) (home) (work) (mobile)

Father's Name: _____

Mother's Name: _____

Mother's **Maiden** Name: _____

Officiating Pastor: _____

Baptismal Location: _____
(Roselle United Methodist Church or city, state)

List any Godparents or sponsors:

_____

_____

_____

_____