

[Water Baptism]

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ DOB (with four digit year) _____

Email _____

Marital Status _____ (Single, Married, Divorced, Widowed)

Have you ever been baptized? _____

If yes, please tell us when and where you were baptized: _____

Do you attend Bethesda Christian Church? If no, what church do you attend? _____

