

Request *for* Baptism

Please complete this form prior to your baptism:

Name: _____

Address: _____

Email address: _____

Phone: Home _____ Work _____ Age: _____

Date you attended Baptism Class: _____ Month you desire to be baptized: _____
M/D/YY

Are you applying for membership? Yes No

Do you hold membership in another church? Yes No

If 'Yes', which one? _____

Please print your name as you want it to appear on your baptism certificate:

Approximately when did you trust in Christ as your Savior? _____

Procedures for Baptism:

- 1) Attend Baptism Class (one class only) 9:30 AM, second Sunday of each month.
- 2) Submit this form to the Baptism Coordinator by email (address below).
- 3) Submit a draft of your testimony to the Baptism Coordinator.
- 4) Once your testimony is finalized, we will coordinate with you the date for your baptism.

Please contact Tom Joyce or Rob Tozier with questions.

Tom Joyce, *Pastor of Discipleship*: 703-941-4124 or joyce@immanuelbible.net

Rob Tozier, *Baptism Coordinator*: 703-691-8027 or rktozier@verizon.net

To be completed by Church Staff

Date Baptized: _____ Pastor Officiating: _____