

**HOLY BAPTISM
(Adult)**

Date of Application: _____

Full Name: _____

Address: _____

City	State	Zip
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Phone: _____

Date of Birth: _____

Place of Birth: _____

Witnesses or Sponsors:

1. Name: _____

Address: _____

Phone: _____



2. Name: _____

Address: _____

Phone: _____



Date of Baptism: _____ **Hour:** _____

Place of Baptism: _____

Officiant: _____