

Friendship United Methodist Church Baptism Checklist

Name of person being baptized: _____

Date of Baptism: _____

Service Time: _____

Date of Birth: _____

Place of Birth: _____
Hospital City/State County

Parent's Full Names _____

Address: _____

City: _____ State: _____ Zip: _____

Phone(s): _____ E-mail: _____

Siblings: _____

Sponsor's Name: _____

Sponsor's Address: _____

Sponsor's Name: _____

Sponsor's Address: _____

Baptized By: _____

It is ok for photographs to be taken during the service, but please do not use a flash, step up on the altar steps, or interrupt the service in any way.

If you would like to have a photo montage projected at the Baptism, please provide 10-12 photographs of your child alone or with family members to the church's graphic artist at least 2 weeks prior to the Baptism. Please direct any questions to Donna McWilliams at 630.630.865.2549 or fumcprojection305@gmail.com

cc: Pastor, Director of Children's Ministries, Chair of Membership,
Office Manager

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