Please complete this form and e-mail it to Julie at [jlorenz@stjstl.net](mailto:jlorenz@stjstl.net). Once we receive it, we will schedule the baptism and confirm that date and time with you. You may also print it and bring it to the meeting with you.

**Full Name:**

*First, Middle, Last (and Maiden if applicable)*

**Date of Birth:**       **Place (City/State):**

**Spouse/Children:**        
*(If applicable. Include relationship to you and ages of children.)*

**Home address:**       **CITY, STATE:**       **ZIP:**

**Primary phone:**       **phone TYPE:**       **Email:**

**St. John Member? YES**  **NO**  **I’m Interested**

**If no, what Church:**

Baptism is God’s gift to us—a new beginning, a new chapter in your LIFEjourney that begins a deeper relationship with Jesus Christ. As the body of Christ, we want to celebrate with you and encourage you. It is also such a powerful witness to others! For these reasons, when selecting the date and time, we encourage you to prayerfully consider being baptized during one of our services.

**Baptism (1st choice) Date:**       **during  after SERVICE:**

**Baptism (2nd choice) Date:**       **during  after SERVICE:**

I **have met with a Pastor/Leader.**  **Please call me to schedule a meeting.**

Why do you want to be baptized?

**Anything else we should know?**

**FOR OFFICE USE ONLY:**

Officiating Pastor:

meeting  approved  calendar  blessing (students only)  update database

Notes: