

BAPTISM REQUEST CARD

Name: _____

Phone : _____

Email : _____

Please check all the responses that apply to you:

- Baptism**
- Confirmation (I have already received infant baptism)**
- Infant Baptism for my child**
- Covenantal Membership of Hope of Glory Presbyterian Church**

I have already been baptized:

Year _____
Church _____
City _____
State _____

[For Parents Only] [Youth Candidate must be 15yrs and older]

- I believe my son or daughter is ready to begin preparing for baptism.**
- My child is not ready to begin baptism preparation at this time. Please notify me when the next baptism process begins.**

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