



# The American Church in Berlin

**An ecumenical home  
for people from diverse nations  
sharing God's love in Jesus**



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## **BAPTISM REGISTRATION FORM**

Full Name of Baptismal Candidate:

First: \_\_\_\_\_ Middle \_\_\_\_\_ Last: \_\_\_\_\_

Place of Birth: \_\_\_\_\_  
Location Name City State (Country if outside USA)

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ M \_\_\_\_\_ F (please Indicate)  
Day Month Year

Contact Information: \_\_\_\_\_ Other: \_\_\_\_\_

Home Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
First Middle Last

Mother's Name: \_\_\_\_\_  
First Middle Last

Godparent Name(s): \_\_\_\_\_  
\_\_\_\_\_

Proposed Date of Baptism: \_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For Office Use Only: (please date & initial) \_\_\_\_\_ Pastor \_\_\_\_\_ Secretary \_\_\_\_\_ Altar Committee \_\_\_\_\_ Cradle Roll

**Please return this form via email, post, or in person to the office or Sunday worship.**