



Date: \_\_\_\_\_

## Baptism Form

*Please complete the following form and return it to the church office prior to being baptized.*

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
[Street] [City]/[State] [Zip Code]

Contact Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

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**Briefly share how you came to know Jesus as your personal Savior.**

**Why do you want to be baptized?**

**How long have you attended Geist Community Church? If not GCC, do you regularly attend another church? YES / NO If yes, where? \_\_\_\_\_**

**Have you ever been baptized? If yes, please briefly explain why you want to be baptized again.**

**If you are under the age of 18, how do your parents feel about you being baptized?**

**What is your favorite Bible Verse?**