

**Athens United Methodist Church
Baptism Information Sheet
PLEASE PRINT**

Child's Name: _____	
Address: _____	
Place of Birth: _____	Date of Birth: _____
Mother's Name: _____ Phone: _____	
Mother's Address: _____	City, State, Zip: _____
Church Affiliation: _____	
Church Address: _____	
Father's Name: _____ Phone: _____	
Father's Address: _____	City, State, Zip: _____
Church Affiliation: _____	
Church Address: _____	
(Optional)	
Sponsor's Name: _____ Phone: _____	
Sponsor's Address: _____	City, State, Zip: _____
Church Affiliation: _____	
(Optional)	
Sponsor's Name: _____ Phone: _____	
Sponsor's Address: _____	City, State, Zip: _____
Church Affiliation: _____	

DATE OF BAPTISM: _____

PASTOR: Rev. Andrew Weidner