



# BAPTISM APPLICATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Phone: \_\_\_\_ - \_\_\_\_\_

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

Address: \_\_\_\_\_  
*street address, city, state, zip code*

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WHY DO YOU WANT TO BE BAPTIZED? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHEN AND HOW DID YOU PLACE YOUR FAITH IN JESUS AS LORD? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW HAS YOUR FAITH CHANGED YOU? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU FEEL YOU MUST BE BAPTIZED TO BE SAVED? \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

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*Please return completed form to the church office.*

Grace Evangelical Free Church | 211 11th Ave. SE, Elbow Lake, MN 56531  
218.685.4679 | [www.gracefree.church](http://www.gracefree.church)