

Baptismal Information
Trinity Lutheran Church
Vermillion, South Dakota

Name:

First	Middle	Last
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Address: _____

Phone: _____

Birth Date and Place: _____

Baptism Date: _____

Congregation: _____

Town: _____

Pastor: _____

Father Name and Address: _____

Mother Name and Address: _____

Siblings: _____

Sponsors/Godparents: _____
