



American Lutheran Church

ELCA

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APPLICATION FOR BAPTISM

Name: _____

Address: _____

Mailing Address: (if different) _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Can we text you? Y N

E-mail address: _____

Birthdate: _____ Birth Location: _____

Father: _____

Mother: _____ (Maiden name) _____

Work place and/or profession _____

Sponsor's name _____

Sponsor's church membership (name and place) _____

Sponsor's name _____

Sponsor's church membership (name and place) _____

Date of Baptism: _____