

**BAPTISM INFORMATION**

Male Female (CIRCLE ONE)

Full Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
City/Town State Zip

Date of Birth \_\_\_\_\_  
Month Day Year

Location Harrisburg Other \_\_\_\_\_

Date of Baptism \_\_\_\_\_  
Month Day Year

Location Tree of Life Church Other \_\_\_\_\_

Officiant Pastor Richard Geib Pastor Catharine Geib Other \_\_\_\_\_

**Parents**

Father \_\_\_\_\_  
Name

Member of Tree of Life Church Yes No

Mother \_\_\_\_\_  
Name

Mother Maiden \_\_\_\_\_  
Name

Member of Tree of Life Church Yes No

Sponsors \_\_\_\_\_  
Name

\_\_\_\_\_  
Name