



MORROW
MEMORIAL UNITED METHODIST
CHURCH

Dear Friends,

Thank you for considering Morrow Church to be your church home. This is a very special family, and we will be blessed by your presence and participation.

Please know that it is required that one parent or guardian be a member of the local congregation. In the spirit of building a relationship with you, whenever possible, we ask that three visits to our worship service be made prior to the date of your request so that you can get to know the amazing people of God who vow to surround and support your family, and those being baptized, over the years to come.

It would be a privilege to be on the journey with your family. I am available to talk with you about how all of this might come together. Know that with every step of faith you will be exceedingly blessed.

Grace and Peace,

Rev. Dr. David Montanye
Senior Pastor (Interim)

Open hearts, open minds, open doors.
The People of the United Methodist Church

Making disciples of Jesus Christ for the transformation of the world.

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Date Submitted: _____

Date Requested for Baptism: _____

Child's Full Name: _____

Birthday: _____

Hospital: _____

Parent's names: _____

Sibling's names: _____

Address: _____

Member of Morrow Memorial UMC yes no

Other congregation _____

Other religion _____

No affiliation _____

Faith History

Mother raised: _____ Father raised: _____

Contact phone: _____

Contact Email: _____

Number of guests expected: _____

Questions or Concerns: _____

We are so excited to have our children baptized in this very special faith community!

Sponsors / Witness _____

Sponsors / Witness _____

We will be in touch upon receipt of this information. Thank you - God bless you!

For office: Internal records updated: _ Certificate prepared: