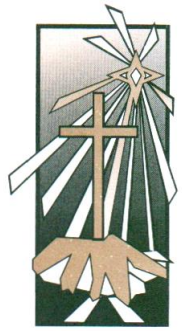


STAR OF BETHLEHEM  
Lutheran Church & School

Wisconsin Evangelical Lutheran Synod



**APPLICATION FOR THE AFFIRMATION OF HOLY BAPTISM**

**PART 1**      Desired Date of Affirmation \_\_\_\_\_

Full Name of Child \_\_\_\_\_

Date of Birth \_\_\_\_\_                      Place of Birth \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_      Maiden Name \_\_\_\_\_

Address of Parents \_\_\_\_\_      Phone Number \_\_\_\_\_

\_\_\_\_\_

Date of Baptism \_\_\_\_\_      Place of Baptism \_\_\_\_\_

Name of Sponsor or Witness \_\_\_\_\_

Church of Sponsor or Witness \_\_\_\_\_

Name of Sponsor or Witness \_\_\_\_\_

Church of Sponsor or Witness \_\_\_\_\_

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**PART 2**      Check all that apply.

- We desire Holy Baptism for our child because we believe that the Lord Jesus instituted Holy Baptism for our salvation.*
- We believe that through Holy Baptism our child will be made a child of the Triune God.*
- We desire that our child would remain a child of God here on earth and in heaven eternally.*
- To this end, we pledge to give our child a Christian upbringing following his/her baptism.*
- We desire that our child be enrolled in the Cradle Roll, and later that he/she be part of the Sunday School of this church.*

SIGNATURES OF PARENTS: \_\_\_\_\_  
\_\_\_\_\_