**Mt. Olive Lutheran Church**

**Rev. Michael Michalk, Pastor**

**5218 Bartlett Blvd., Mound, MN 55364**

**952-472-2756**

**Information for Holy Baptism**

**Child’s first name:** Click here to enter text.

**Child’s middle name:** Click here to enter text.

**Child’s last name:** Click here to enter text.

**Date & place of birth:** Click here to enter text.

**Desired date/time of baptism:** Click here to enter text.

**Please note: If either father or mother are members of Mt. Olive, the child will be registered as a baptized member of Mt. Olive. Otherwise, the child will be registered as a baptized member when one or both parents become members.**

**Father’s first name:** Click here to enter text.

**Father’s middle name:** Click here to enter text.

**Father’s last name:** Click here to enter text.

**Is the father a member of Mt. Olive?** Choose an item.

**If not, is the father interested in becoming a member?** Choose an item.

**Mother’s first name:** Click here to enter text.

**Mother’s middle name:** Click here to enter text.

**Mother’s last name:** Click here to enter text.

**Mother’s maiden name:** Click here to enter text.

**Is the mother a member of Mt. Olive?** Choose an item.

**If not, is the mother interested in becoming a member?** Choose an item.

**Address:** Click here to enter text.

**Phone, email, etc:** Click here to enter text.

**First Sponsor/godparent:** Click here to enter text.

**Church affiliation of first sponsor:** Click here to enter text.

**Second Sponsor:** Click here to enter text.

**Church affiliation of second sponsor:** Click here to enter text.

**Third sponsor (if desired):** Click here to enter text.

**Church affiliation of third sponsor:** Click here to enter text.

**Fourth sponsor (if desired):** Click here to enter text.

**Church affiliation of fourth sponsor:** Click here to enter text.

**Are parents or grandparents or others providing flowers for the altar?** Select Yes or No.

**Any other information you would like us to know?** Click here to enter text.

**Please email this completed form to the Administrative Assistant,** **admin@mountolivelcms.org****, and to the Pastor,** **pastor@mountolivelcms.org**

**If you like you may also email a photo for the screen.**