BAPTISM APPLICATION

Instructions:
Baptisms are held quarterly. Please complete all the information in the form below. After submitting this form, you will be contacted by the GCI office staff to inform you of the next available baptism classes and ceremony date. Candidates must attend baptismal class prior to the ceremony. Please note that submission of this form does not imply an approval of your baptism.

Date _____

Baptismal Candidate's Full Name _____

Gender: ☐ MALE ☐ FEMALE Birth Date ____/____/_____

Address _____

Primary Phone (_____) _____ - _____ Secondary Phone (_____) _____ - _____

E-mail Address _____

Are you a member of The Glory Center? ☐ YES ☐ NO

Have you received salvation? ☐ YES ☐ NO

Name of Closest Relative _____

Phone Number (_____) _____ - _____

Are you willing to take a baptism class? ☐ YES ☐ NO

Submit this form to: Glory Center International
P.O. Box 6911
Champaign, IL 61826