



Christian Heritage Church

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WATER BAPTISM APPLICATION FORM

(please print all information clearly)

Full Name _____ Date of Birth _____

Address _____

City, State, Zip _____ Phone# _____

Your status: Single Married Divorced Separated Widowed

Number of children _____ Your occupation _____

When did you receive the Lord Jesus as your personal Savior? _____

Where did you receive the Lord as Savior? _____

Of what churches have you been a member? _____

Do you smoke? Yes No Do you use Drugs? Yes No

Do you drink alcoholic beverages? Yes No Sometimes

If God asked you why you should go to heaven, explain what you would tell Him?

Do you accept the Bible as the inspired Word of God and as your final authority in all matters of faith and practice? _____ Do you read the Bible daily? _____

Do you wish to be a member of Christian Heritage Church? _____

List below any questions, needs or problems that you would like to discuss with the Pastor or one of our elders: _____

Your signature

Today's Date

Parent or guardian must sign for persons under 18 years of age.

"Go ye into all the world and preach the gospel to every creature." Mark 16:15