RECORD OF PASTORAL ACT

Please email to: umea@gbhem.org

Baptism ◯ Profession of Faith ◯ Admission into Church ◯

Date Place

Chaplain Name

Chaplain Address

Chaplain Email

Constituent Name Date of Birth

Temporary Address

Permanent Address

Home Church and Address

Names of Witnesses or Sponsors

For infant baptisms please complete this information: :

Father's Name Mother's Name

Home Church Address

Remarks

Chaplains Signature

Date Signed