

## Water Baptism Application for Primary School Children

Church site you attend:  Knox  Casey  Manningham

Name: \_\_\_\_\_  
(Given Name) (Surname)

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_ (A confirmation letter with further details will be sent electronically)

*Please answer the following:*

1. Have you received Jesus Christ as your personal Saviour?  Yes  No  
Date you made this decision to become a Christian. \_\_\_\_/\_\_\_\_/\_\_\_\_  
Where you made this decision \_\_\_\_\_

2. Have you been baptised in the Holy Spirit with speaking in tongues?  Yes  No  
If 'No', do you desire to be filled with the Holy Spirit?  Yes  No

3. In your own words, please write down why you want to be baptised in water.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Explain in your words what is the meaning of water baptism.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Have you read the Baptismal Booklet "So you want to be baptised?"  Yes  No  
(hard copy or from the ROAR Webpage <http://www.citylifechurch.com/children/>)

### **Permission from Parent/Guardian for Water Baptism**

I \_\_\_\_\_ (Name of Parent/Guardian) have read the above form and discussed water baptism with my child \_\_\_\_\_.

I do/do not consent to his/her decision to undergo water baptism by immersion.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

#### **Office Use Only**

Application approved/not approved because \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date to be baptised: \_\_\_\_/\_\_\_\_/\_\_\_\_ Children's Pastor's Signature: \_\_\_\_\_