

ADULT BAPTISMAL PACKET



SAINT PAUL AFRICAN METHODIST EPISCOPAL CHURCH

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INTRODUCTION

Baptisms are performed on the third Sunday of every month during the 10:00 AM service.

The members should call the church to schedule the baptism at least one month prior to the date of the baptismal.

The member will be given a brief overview of the guidelines when she/he calls the church office. An information form and a set of guidelines will be mailed to the member requesting the baptism. The parents and the M.S.S. must have a phone conference and all forms must be completed and return before the baptismal service takes place.

SAINT PAUL CHURCH BAPTISMAL GUIDELINES

In keeping with the spirit of excellence in ministry, the following guidelines should ensure a smooth Baptismal Ceremony. Please feel free to contact the church office if you have any questions.

1. The baptismal candidate must call the church office at least one month in advance to schedule a baptismal. Baptisms are held on the **third Sunday** of each month.
2. The Membership Services Secretary will arrange a brief phone meeting with the parent/guardian(s) prior to the Baptismal service.
 - A. A copy of the Baptismal Service Guidelines and Forms will be mailed to the parent/guardian(s). Upon receipt of the Guidelines, call the Membership Services Department to confirm receiving these items.
 - B. The completed form must be received by the Membership Services Secretary as specified in the letter. Baptismal service **is not** confirmed if the proper documents are not received on time.
3. Reserved seats will be provided for those who are present 30 minutes prior to service. The Membership Services Secretary will notify the Stewards, Stewardesses and Ushers of the names of the families participating in the Baptismal Service.
4. Any additions or changes should be reported to the Membership Services Secretary one week prior to the Service.



INFORMATION FORM

NAME: _____

PHONE NUMBER: (HOME) _____ (WORK) _____

CIRCLE LEGAL MARITAL STATUS:

MARRIED

SINGLE

SEPARATED

DIVORCED

MEMBERSHIP DATE: _____

Number of Guests Expected to Attend: _____

DATE OF BAPTISMAL: _____



“I, _____, verify that I have read the guidelines and understand that if there are any changes, I must notify Membership Services prior to the date of my baptism.”

Signature

Date

