Harriman Chapel

An outreach of Calvary Chapel Cheyenne

Request for Baptism

Full Name: _____ Phone: _____
(first) (middle) (last)

If Child: Age: _____

Father: _____ Phone: _____

Mother: _____ Phone: _____

Date you would like to be baptized: _____

If you confess with your mouth Jesus as Lord, and believe in your heart that God raised Him from the dead, you will be saved.
Romans 10:9

Have you confessed Jesus as Lord of your life? ❑ Yes ❑ No
Do you believe God raised Him from the dead? ❑ Yes ❑ No

Special Information (i.e. medical conditions, etc.):