**유아 세례 신청서**

**Application for Infant Baptism**

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| **신청자 성명****Name of Applicant** | **한글 Korean** | **영어 English** |
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| **생년월일****Date of Birth** | **년 월 일****Year Month Day** | **(M / F)** |
| **보호자 성명****Name of Parent/Guardian** | **부****father:** | **모****mother:** |
| **보호자 세례여부****Baptism of Parent?** | **부****father:** | **모****mother:** |
| **전화번호****Phone No.** |  |
| **주소****Address** |  |
| **이메일****E-mail** |  |
| **교인번호****Church Membership #** |  |
| **공동체 or 교육부****Group or dept.** |  |
| 위 사람은 \_\_\_\_\_\_\_\_\_\_\_\_년 \_\_\_\_\_\_\_월 \_\_\_\_\_\_\_일유아 세례를 베풀어 주시기를 인랜드 교회 당회 앞에 신청합니다.The parent/guardian of the applicant would like to request permission from the Session of Inland Church for Infant Baptism on the Sunday of**\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **보호자 서명****Sign of Parent/Guardian** |  | **날 짜****Date** |  |

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