

**POTOMAC CONFERENCE CORPORATION
CLERK/MINISTERS REPORT OF ADDITIONS BY BAPTISM OR PROFESSION OF FAITH**

Name: _____
 Address: _____
 City, State, Zip Code: _____
 Phone number: _____
 Full Date of birth: _____
 Church joining: _____
 Name of Head of Household: _____

Occupation: _____

STUDIES

If a student write
 School grade: _____
 Write the
 SDA School name: _____
 Write the
 Non SDA school name: _____
 Ethnic class: _____

Minister Officiating _____
 email address: _____

Church: _____

Pick one: Baptism Re- Baptism Profession of faither
 Pick one: Single Married Widow
 Pick one: Male Female

DATE OF EVENT EVENT AND PLACE:

THIS REPORT MUST BE COMPLETED BY THE CLERK/MINISTER REPORTING BAPTISMS OR THOSE TAKEN INTO THE CHURCH BY PROFESSION OF FAITH
 THIS FORM MUST BE FILLED IN IMMEDIATELY FOLLOWING THE BAPTISM OR PROFESSION OF FAITH
 AND BE SENT TO THE CONFERENCE RIGHT AWAY OR SUBMITTED IN EADVENTIST.

Potomac Conference 606 Greenville Avenue Staunton, VA 24401	PC2 / CEDA 5203 Manchester Drive Temple Hills, MD 20748	301-899-0012 540-886-0771 conferenceclerk@pcsda.org	Fax: 540-886-5734
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