Three Valleys Benefice

APPLICATION FOR HOLY BAPTISM

Full Name of the Candidate	Date of Birth		
Date and Time of proposed Baptism:	Which Church?		
Names of Godparents*		Baptised	Confirmed
		Y/N	Y/N
Father's full name:		Baptised	Confirmed
Profession/Occupation		Y/N	Y/N
Address:	Telephone No: Mobile No: E-mail:		
Mother's full name:		Baptised	Confirmed
Profession/Occupation		Y/N	Y/N
Address:	Telephone No: Mobile No: E-mail:		
Service preferences (favourite Hymns, re	eadings etc.)		
Approximate number of guests at church	n:		

^{*}You need at least two Godparents. All Godparents must be baptised.

FOR CLERGY TO COMPLETE:-

Date of first meeting	:				
Date and time of rehearsal (if required):					
Any contact with other churches or clergy:					
Anyone they know well who regularly attends the local church:					
Anything handed out (e.g. a leaflet on baptism):					
Any other meetings?					
Date:	Place:	People present:	Subjects covered:		
Checklist:					