

St Oswald's Church, Lower Peover

Application for BAPTISM

Date of Baptism		Time of baptism	
Date of Birth		Place of Baptism	
Full name of person for Baptism			

Name of Father			
Name of Mother			
Occupations			
Name and dates of birth of siblings (if applicable)			
Address:			
			Postcode:
Telephone numbers	Home:	Mobile:	
Email contact			

Names of Godparents	Are they baptised?	Are they confirmed?
1.	Y/N	Y/N
2.	Y/N	Y/N
3.	Y/N	Y/N
4.	Y/N	Y/N

Notes for service	
Numbers attending?	
Anyone reading?	
Any siblings / cousins?	

Data Protection:

We would like to be able to contact you about what is going on at St. Oswald's, such as special services or family events. If you do not want your name and address to be used in this way will you please mark a cross in this box.

If you are uncertain of anything or wish for more information please call **the Vicar** on **01565 722304** or email **stoswalds@peoverchurches.org,.uk**

Office Use

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