

PARISH OF FARLINGTON - ST.ANDREW and THE CHURCH OF THE RESURRECTION

**BAPTISM APPLICATION FORM** *(please read carefully, complete and return)*

**Candidate's full name** \_\_\_\_\_

**Date of birth** \_\_\_\_\_

**Contact address** \_\_\_\_\_

**Tel.** \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Father's full name** \_\_\_\_\_

**Occupation** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

**Mother's full name** \_\_\_\_\_

**Occupation** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

**Godparents:**

1) **Name** \_\_\_\_\_

**Address** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

2) **Name** \_\_\_\_\_

**Address** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

3) **Name** \_\_\_\_\_

**Address** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

4) **Name** \_\_\_\_\_

**Address** \_\_\_\_\_

Baptised - YES/NO Confirmed - YES/NO

**OVER**

**Home visit:** (if requested)

Place \_\_\_\_\_

Date & time \_\_\_\_\_

**Baptism preparation:** (please bring along your 'Baptism in the Church of England leaflet')

Place \_\_\_\_\_

Date & time \_\_\_\_\_

**Rehearsal:**

Place *The Church of the Resurrection*

Date & time \_\_\_\_\_

*(The rehearsal usually takes place at 1.40pm on the 1<sup>st</sup> Wednesday of the month just before the Toddlers Service).*

**Service:**

Place *St. Andrew's / Church of the Resurrection*

Date & time \_\_\_\_\_

Expected number of guests at the Service \_\_\_\_\_

*(If your service is at St. Andrew's Church, please remember that seating is limited and you may have to restrict the number of guests).*

**Welcome Service:**

One month on from your baptism service we would like to invite you back to join us for the baptism family welcome service (2<sup>nd</sup> Sunday in the month at 10am). This is a short service suitable for all ages and provides an opportunity to join with the normal church congregation. This follow up service is part of the baptism process in the parish.

Place *The Church of the Resurrection*

Date & time \_\_\_\_\_

***Please make a note of all details and return form as soon as possible to:***

Revd. Steve Summers

The Rectory

27 Farlington Ave

PORTSMOUTH

Hants. PO6 1DF ☎ 023 9237 5145 ✉ [summertime@tiscali.co.uk](mailto:summertime@tiscali.co.uk)

If you have any queries or problems at any time, please get in touch.

*Revised Jan 2004*