

# WEST CHELTENHAM TEAM MINISTRY

St Aidan & St Silas    St Barnabas    St Mark

## BAPTISM APPLICATION FORM

	Christian Names	Surname	Boy/Girl	Date of Birth
<b>Child</b>				

	Christian Names	Surname	Occupation
<b>Father</b>			
<b>Mother</b>			

Address	
(post code)	
Telephone	

(Please tell us if any of this changes)

Other Children in the family:-	
Which of the churches in the team do you attend, or have the strongest links with?	
What are your links with the Church?	

Names of your godparents (fill in when you meet with the clergy) – usual Christian name and surname	
--	--

(Data Protection Act: Some of this information will be kept in Church records, including on our computer)