

Application for Baptism

Please return this form to: The Vicar, The Revd. David MacGeoch,
24 Wells Road, GLASTONBURY, Somerset, BA6 9DJ. Tel: (01458) 834281

Date:	_____
Time:	_____
Church:	_____

Child's Christian Names and Surname:	Date of Birth:
_____	_____

Christian Names:	Surname:	Occupation:	Baptised:	Confirmed:
Father:	_____	_____	_____	_____
Mother:	_____	_____	_____	_____

Parent's Address:	Telephone Number:
_____	_____

Full Name of Godparent:	Baptised:	Confirmed:
① _____	_____	_____
② _____	_____	_____
③ _____	_____	_____
④ _____	_____	_____

Name of Baptism Visitor: _____