Holy Ghost Parish Holy Ghost Church, Sherborne Rd. RG21 5TD



St. Bede's Church Popley Way. Basingstoke. RG24 9DX

APPLICATION FORM FOR BAPTISM

Child/ren's Full Name	me:	Na	ull	F	's	'ren	ld/	Chil	(
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Female

Male

Child/ren's date of Birth: Child/ren's Town of Birth:

Child/ren's Father's full name:						
Address:						
Tel. No: E-ma	ail:					
Religion						
Place of Marriage						
Which Sunday Mass do you regularly attend?						
Child/ren's Mother's full name:						
Child/ren's Mother's Maiden name:						
Address if different:						
Tel. No: E-mail:						
Religion						
Godfather's full name	Religion					
Godmother's full name:	Religion					
Baptism Preparation Dates:	Time:					
Welcome Date:	Time:					
Baptism: Date:	Time:					
(Please choose which Celebrate you wish – or (No preference)						
Celebrant Fr John Lee	Deacon Tony					

DATA Protection Statement

Information provided on this form, together with all other personal data held about individuals by the Parish and the Diocese of Portsmouth, is processed in accordance with the Diocese's Privacy Notice which can be obtained from the Diocesan website or from St Bede's parish office

Child/ren's Fathe	Date:						
Child/ren's Moth	Date:						
For office use only							
Baptism Preparat	ion Date:	Time					
Baptism:	Date:	Time					

Please return form to Liz Murphy in the Parish Office, or return to email below: baptism@stbedesbasingstoke.org.uk

Tel: 01256 465214 Email: baptism@stbedesbasingstoke.org.uk Website: https://www.stbedesbasingstoke.org.uk/sacraments/

The Catholic Parish of Holy Ghost, Basingstoke: Holy Ghost Church & St Bede's Church

Registered Charity No. 246871

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