**Baptism Details Confirmation**

St. Mary’s Witney, Holy Trinity Wood Green, St. John’s Hailey, St. John’s Curbridge and Minster Lovell Churches

Full Names of Child ............................................................................................ Bapt. Confirmed

Name of Father ....................................................................................................... Y / N Y / N

Occupation of Father ..................................................................................................

Name of Mother .......................................................................................................... Y / N Y / N

Occupation of Mother ………………….....................................................................

**Baptisms require the consent of both Father and Mother. Please sign here to give this consent:**

Father…………………………………………………… Mother………………………………………………

Address ...............................................................................................................................................

Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. ................................................ Child’s date of birth. ...........................................................

Baptism Date chosen ............................................... Which Church......................................................

Please state approx. number of guests at Baptism …………

Godparents full names [**they must be baptised (christened**)] and may be confirmed] Bapt Confirmed

 ................................................................................................................................. Y / N Y / N

 ................................................................................................................................... Y / N Y / N

 ................................................................................................................................... Y / N Y / N

.................................................................................................................................... Y / N Y / N

**Please return completed form to: The Parish Office, St. Mary’s C of E Church, Church Green, Witney Oxon OX28 4AW** | Tel 01993 779492

**GDPR requires us to have your consent to hold and use your family’s details. We hold these details for up to four years and may also contact you regarding other church activities. Do you give consent for us to do these? Please tick one or the other.

Yes…. No……**

 **-------------------------------------office only-------------------------------------**

Date of preparation meeting chosen\_\_\_\_\_\_

Date of Service of commissioning before Baptism chosen  Church -