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| **Baptism Request - Adult** | A black and white logo  Description automatically generated |
| **Details for Baptism Register** | **St Barnabas, Swanland** |

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| --- | --- | --- |
| **Christian name(s) and surname** | **Date of birth** | **Address** |
|  |  |  |
| **Sponsors / Supporting Friends (Optional)** |  |
|  | **I confirm that, to the best of my knowledge, I have not already been baptised / christened.** |
|  |  |
| **Your telephone number** | **Your email address** | **Signed** |
|  |  |  |
| **Please return to: Revd Kevin Barnard – email:** **vicar@stbchurch.org.uk**Church Office: St Barnabas Church, Main Street, Swanland. HU14 3QP |
| Office Use:Date/time of baptism requested/agreed: | Total number expected: |