

Supplementary Faith Request Form

SECTION A.

Name of Child

Name of Parent /
Guardian

Faith Community to
which you belong

Place and Date of
Baptism

SECTION B.

(To be completed by a priest/Minister of Religion)

I am able to confirm that the above named child has been baptised in the
above mentioned place

Signed (Priest):

Please print name:

Address of place of
worship:

Email address to return to clares-ao@st-clares.liverpool.sch.uk