**Application for Baptism**

At which church would you like the baptism to take place?

St Anselm’s Church, Kennington SE11 5DU

St Peter’s Church, Vauxhall SE11 5HY

Please state preferred month for baptism\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child’s Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Birth | Christian Name(s) | Surname | Gender |
|  |  |  |  |

**Parents’ Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Full name and address | Phone number and/or email address | Occupation | Have you been | |
| baptised? | confirmed? |
| Mother |  |  |  |  |  |
| Father |  |  |  |  |  |

**Godparents’ Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Full name | Address | Has s/he been…. | |
| baptised? | confirmed? |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |

Please return this form to:

NLP Office, Centenary Hall, Cottington Street, Kennington, SE11 4RZ or [jenny.morgans@gmail.com](mailto:jenny.morgans@gmail.com).

A member of the team will contact you to confirm the date of the baptism and arrange to visit you.