## SERVICE OF BLESSING AND THANKSGIVING REQUEST



Date of Request:	
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Surname			
Christian Names			
Male/Female			
Date of Birth			
Father's Name			
Mother's Name			
Mother's Maiden Name			
Address			
Home Telephone No.			
Mobile No.			
Email Address			
Date of Blessing			
Alternative Dates	1.	2.	
Place of Blessing			
Other Information			
Number of Guests Expected			
Permission to display home address on Order of Service/Church magazine			Y/N
Permission to take a photo of the Baptismal family for the Church magazine			Y/N
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