

BABY DEDICATION

Name of child: _____ D.O.B. _____

Name of parents: _____ Tel. No. _____

Address: _____

Postcode: _____

Date of dedication: _____ Morning/Evening: _____

Dedication chorus: _____ Approx. No. of guests: _____

Name of Pastor dedicating child (leave blank if no preference) _____

To comply with the Data Protection Act 1998, permission must be granted by the parent/carer before any images of your child/children are taken and used. These images may appear in our printed publications, on our website, on video productions or all. (Delete as appropriate).

Signed: (parent/adult with parental responsibility) _____

Date: _____