



## Supplementary Information Form

Child's personal details:

Surname:.....

Forename:.....

Date of birth:.....Sex: M/F

Address:.....

.....

.....Postcode:.....

Parent's details:

Mother's Name:.....

Address (if different from the child).....

.....

.....Postcode:.....

Telephone number:.....Mobile number:.....

Father's Name:.....

Address (if different from the child):.....

.....

.....Postcode:.....

Telephone number:.....Mobile number:.....

Church Affiliation:

Church attended:.....

Name of Minister/Leader:.....

Minister's/Leader's Telephone Number:.....

Degree of parents'/child's (not grandparents) involvement with church excluding Christmas, School Services, Weddings, Baptisms etc.

(Please tick) Weekly:.....Monthly:.....Occasionally:.....(if so, how often in the last year?).....

Church involvement includes: Church services: yes/no Sunday School: yes/no

Bible Study: yes/no Other: (please specify).....

Length of time parents have been involved with the church:.....years.....months

**Minister's/Leader's comments to support this application: (this needs to be completed by the Minister/Leader)**

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**Minister's/Leader's signature:.....Date:.....**