

Yahweh Christian Fellowship

52 Fairlight Road, Tooting, London SW17 0JD

Tel: 020 86824527 | **Mb:** 07388 299104 (Office opens Tuesday – Friday 10.00 a.m. to 5.00 p.m.)

Web: www.ycfinternational.co.uk | E-mail: admin@ycfinternational.co.uk

Christening Booking Form

Dear Parent, Carer, Guardian,

It is a unique honour for this ministry to be asked to carry out the Christening / blessing of your child / children. It is with this in mind that we would ask you to take a few moments to fill out this booking form that will enable us to make a valuable contribution to your special day.

If you are a member of this Church and the child/ children are directly your children or dependents, there is no fee but you are still required to **complete and return the form signed**. If you are not a member of this church or as a member, the child / children being dedicated are not directly your children, i.e. grandchildren etc, there is a fee of £25 per child that helps to cover the costs of the certificate and administration. We are a registered charity and all monies received will ultimately go towards the advancement of the Christian Faith expressed through this ministry. All forms must be signed.

The Christening service will take place after our main service which is from 11am-1pm. Whilst you are welcome to join us for our main service, your guests can begin arriving from 1.15pm and your actual christening service take place from **1.30pm - 2.00pm.** The general format is as follows and is approx. 30 minutes and will carried out by one of our ministers:

Opening song
Presentation of Parents/Guardians.
Presentation of child.
Short Word of encouragement from Minister.
Prayer & blessing of Child.
Prayer for Parents and god-parents.
Presentation of certificate & time for pictures.

If you have any questions regarding the proposed Christening or completion of the booking form, please do not hesitate to contact the YCF office by phone or e-mail. It is our intention to make your day special so please return the completed form as soon as possible.

Yours sincerely YCF Administration



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1. DETAILS OF PARENTS / GUARDIAN / CARER
Name:
Address:
Telephone No:
E-mail address:
Are you a Christian? Yes No
Will you be having godparents? □ Yes □ No
Preferred date(s) for Christening: Date (1)
(Please note we will do our best to confirm your preferred date but it is dependent on availability)
2. FULL NAMES OF CHILD/CHILDREN
1(Age: Sex:)
2(Age: Sex:)
3. VISITORS
How many people do you envisage being invited to the Christening? 0-20 20-30 30-40 40-50 50-100
Will you have any godparents? ☐ Yes ☐ No
4. MEDICAL
Please indicate if your child (children) has any specific health challenges or medical requirements, which need to be taken into consideration on the day. Yes No
If yes please state:
Please indicate if your child (children) has any specific health challenges or medical



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5. DECLARATION (signed by all applicants) By signing, I confirm that I have provided accurate information regarding the child / children to be christened and have the authority to put the child forward for such a christening.
Signed.
Date:

6. PAYMENT DETAILS

Please note proposed christening will only be confirmed once date has been agreed by the admin office and payment has been received.

Yahweh Christian Fellowship bank details: Sort code: 30-12-95

Account no: 00080482

Please use 'christening' as a payment reference with your initials. Example "S.M. Christening"

Please e-mail your completed form to admin@ycfinternational.co.uk