# Holy Family Catholic High School

**Virgin’s Lane, Thornton, Liverpool, L23 4UL Telephone 0151 924 6451**

# Supplementary Faith Request Form

This form must be completed by the parent and signed by a Minister of Religion ONLY if evidence of baptism cannot be produced.

* *If you have evidence of baptism please attach it and complete Section A.*
* *If you* ***do not*** *have evidence of baptism, a Minister of Religion needs to complete and sign Section B. Parents must complete Section A.*
* *This form and any evidence must be completed and returned to Holy Family Catholic High School asap*

**SECTION A** *(to be completed by parent)*

Pupil Name:

Address:

Date of Birth:

Current primary school:

What is your faith?

Name of Parish in which you live:

Parent Name:

Mobile number: email address:

**SECTION B** *(to be completed by Minister of Religion)*

If **Roman Catholic** would you confirm that the applicant is a baptised Catholic

Yes No

If Christian would you confirm that the applicant is a baptised Christian

Yes No

If of **a faith other than Christian** please would you confirm that the applicant is a member of your faith community?

Yes No

Signed (Minister of Religion) Print name

Address:

A picture containing diagram

Description automatically generatedPosition held:

Date

Please return form to: