

St John's Church of England School

Supplementary Information Form

PLEASE RETURN AT THE TIME OF APPLICATION
TO ST JOHN'S C of E INFANT SCHOOL
BARFORD LANE, CHURT, FARNHAM, SURREY. GU10 2JE
office@stjohns-farnham.surrey.sch.uk

Name of Child: DOB:

Name of Parent(s):

Address:

Tel Number: Mobile:

E-mail:

Please tick the appropriate box:

- I am a regular worshipper at St John's the Evangelist,
Churt with Rushmoor (criterion 5a refers)
- I am a regular worshipper at a Christian church of another
denomination (criterion 5b refers)

Parent / Carer's signature: Date

TO BE COMPLETED BY THE VICAR / MINISTER / PASTOR

I confirm that is known to me

as a regular worshipper at Church.

Signed: Date:

Note for Vicar:

Regular worship is defined as once a month over a minimum period
of two years preceding the application, by a parent and/or the
child.