

**Stepwise Participant Form – Faith Filled Worship**

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| --- | --- |
| Name: |  |
| Full postal address: |  |
| Email: |  |
| Tel: / Mobile: |  |
| Your local church: |  |
| Your URC Synod: |  |

**I am interested in attending the Stepwise stream – Faith Filled Worship.**

**I have completed the first Stepwise stream ‘Faith Filled Life’**

* Please state which Synod organised the FFL group:
* Date FFL completed:(month/year)

**If you are under 18, you are particularly welcome to become part of Stepwise.** Please give your date of birth:

**Consent**

I give my consent for my data to be handled according to the Yes / No

[Wessex Synod Data Privacy Statement](http://wessexsynodurc.org.uk/wp-content/uploads/2018/05/180524-Wessex-Trust-Data-Privacy-Statement.pdf).

I give my consent for my data to be passed to Church House for registration Yes / No

on the Stepwise hub. [URC Data Privacy Notice](https://urc.org.uk/images/Communications/docs/EL_Ministries_CRCW_Privacy_notice.pdf).

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Participant)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(signature of parent/guardian if participant is under 18 years)

Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return this form to the Development Team Administrator, Wessex Synod Office**

Email: [development@urcwessex.org.uk](mailto:development@urcwessex.org.uk).

Post to: Wessex Synod Office, 120 Alma Road, Southampton, SO14 6UW.