

DIOCESE of WAKEFIELD

VISITATION 2009

ARCHDEACONRY: **DEANERY:**

PARISH:

DECLARATION BY CHURCHWARDEN

Name (Mr/Mrs/Miss)

Address.....

.....

..... Post Code

Telephone : (home including STD code)
.....

Telephone : (work including STD code)
.....

Mobile

Fax

E-mail

I declare that I will faithfully and diligently discharge the duties of the Office of Churchwarden for the above Parish during the period of my appointment, and that I am not disqualified from holding office as a Churchwarden under Section 2(1), (2) or (3) of the Churchwardens Measure 2001.

Signed

Date

Notes:

(1) The disqualifications are:-
(a) disqualification as a Charity Trustee under s.72 of the Charities Act 1993;
(b) convictions within Schedule 1 to the Children and Young Persons Act 1993; and
(c) disqualification under Section 10(6) of the Incumbents (Vacation of Benefices) Measure 1977.
If you are in any doubt as to whether or not you may be disqualified, please consult the Diocesan Registrar before signing this form.

(2) Under the Data Protection Act 1998, you will be taken as agreeing to your contact details as set out above being included in the Diocesan Directory. If you object to this will you please tick below and state what information you do not wish to appear in the Directory:-

I do not wish the following contact details to appear in the Diocesan Directory:
all/address/telephone/e-mail (*Please delete as appropriate*)