# FREEMAN ADMISSION FORM

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| **Title:** |  | |
| **Surname:** |  | |
| **First Name:** |  | |
| **Middle Name(s):** |  | |
| **Date of Birth:** |  | |
| **Address:**  Please include full postcode |  | |
| **Telephone:** |  | |
| **Email:** |  | |
| **Occupation:** |  | |
|  | | |
| **Name of Freeman Relation:** | |  |
| **Date of Admission:** (if known) | |  |
| **Admission Eligibility:**  Please check which applies to your status | | Son/Daughter  Step-son/ Step-daughter  Grandson/Granddaughter  Son-in-law/Daughter-in-law  Apprentice |
| **Evidence:**  Please check all those that are relevant to your application and ensure you have submitted the related documentation | | Birth Certificate  Adoption Certificate  Parent’s Birth Certificate  Marriage Certificate  Parent’s Marriage Certificate  Apprentice Agreement |
| **Oath:**  Please indicate which oath you would like to take. Please refer to the guidance for the full oaths. | | ‘I swear by Almighty God’  ‘I affirm’ |

Once your application has been verified and approved you will be given dates of upcoming ceremonies and asked to indicate your preference. You will be able to bring up to five guests, please use the space below to detail their names and any dietary requirements they may have.

|  |  |
| --- | --- |
| **Guest 1:** |  |
| **Guest 2:** |  |
| **Guest 3:** |  |
| **Guest 4:** |  |
| **Guest 5:** |  |
| **Dietary Requirements?**  Please detail |  |

Please return your completed form and accompanying original documents to **Civic Office, 3rd Floor, St Aldates Chambers, St Aldates, Oxford, OX1 1DS**.Your documents will be returned to you via recorded delivery. Should you have any queries relating to the completion of this form or if details change after returning the form, please contact the Civic Office on 01865 252414.