

APPLICATION FOR CONFIRMATION

CANDIDATE'S DETAILS (PLEASE PRINT IN CAPITALS)

Surname:		
Christian Names:		
Date of Birth:	Date of Baptism:	
Proof of Baptism provided: Yes <input type="checkbox"/> <i>If not bishop needs to be advised before date</i>		
Address:		
State:	Postcode:	Email:
Home Phone:	Mobile:	

PARENTS'/GUARDIAN

Full Names:	Signature:
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SPONSORS' FULL NAMES (N.B. Sponsors must be confirmed people)

Name:	Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No

CONFIRMATION DETAILS (OFFICE USE ONLY)

Confirmation Date:		Confirming Bishop:
Time:		Notes:
Place:	St Paul's Ipswich	
Prepared by:		

◆◆◆ PLEASE RETURN COMPLETED FORMS TO THE PARISH OFFICE DIRECTLY OR VIA EMAIL OR POST ◆◆◆