SAINT THOMAS CHURCH FIFTH AVENUE

APPLICATION FOR CONFIRMATION, RECEPTION, OR RE-AFFIRMATION

Adults, please fill out Section I. If the Confirmand is a Child, Parents, please fill out Sections I & II.

I am seeking…

…Confirmation ☐

…Reception ☐

…Re-affirmation of Baptismal Vows ☐

SECTION I: FOR ALL APPLICANTS

Full Name

Date of Birth

Full Address

Date of Baptism *Place of Baptism (include city and state)*

Please supply a copy of your Baptismal Certificate. If you cannot locate your certificate, please speak to a priest for options.

Home Phone *Work Phone* *Mobile Phone*

Previous Religious or Denominational Affiliation (if not Episcopalian)

Email Address

I have been confirmed already ☐Yes ☐ No

If Yes, please indicate:

Date of Previous Confirmation *Place of Previous Confirmation*

Signature and Date

Number of Guests I anticipate will attend:

SECTION II: FOR CHILDREN

Names of Parents/Guardians

Full Address (if different from above)

Home Phone *Work Phone* *Mobile*

Email Address

For Office Use Only:

Baptism has been verified by:

Examination of Certificate ☐

Parish Records Confirmation ☐

Priest's Initials:

Date of Confirmation, Reception, or Re-Affirmation: