

## CONFIRMATION REQUEST

**Please print & use full names**

**Date of Application** \_\_\_\_\_

Candidate's Name \_\_\_\_\_ Gender \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Place of Birth (City & Country) \_\_\_\_\_

Place & Year of Baptism \_\_\_\_\_

Address \_\_\_\_\_

Father's full name \_\_\_\_\_

Occupation \_\_\_\_\_

Email address \_\_\_\_\_

Mother's full name \_\_\_\_\_

Occupation \_\_\_\_\_

Email address \_\_\_\_\_

Religious Affiliation of Parents \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Sponsor \_\_\_\_\_

Address \_\_\_\_\_

Sponsor \_\_\_\_\_

Address \_\_\_\_\_

Confirmation Date: TBA Time: 9.00am

Place of Confirmation: St John's Anglican Church

Remarks \_\_\_\_\_