



St Paul's Episcopal Church

CONFIRMATION ~ RECEPTION ~ REAFFIRMATION

Date _____

Last Name _____ First Name _____ Gender _____

Address _____

Telephone _____ E-mail address _____

Date of Birth ____ / ____ / ____ Place of Birth _____

Father's Full Name _____ Religious Affiliation: _____

Mother's Maiden Name _____ Religious Affiliation: _____

Parents' Residence _____

Have you been baptized? YES / NO If so, when? ____ / ____ / ____

Church & Denomination of Baptism: _____

Address if known _____

Have you ever been confirmed? YES / NO If so, when? ____ / ____ / ____

Church/Denomination of Confirmation: _____

Address (if known) _____

Mentor (for youth confirmation): _____

Mentor email address: _____

Office Use

Confirmation _____ Reception _____ Reaffirmation _____ Baptism _____