

ANGLICAN DIOCESE OF GRAFTON
LIST OF CANDIDATES FOR CONFIRMATION

PARISH…… *DATE……*

PRESENTED BY …… *SIGNATURE ……*

CANDIDATES

SURNAME	***CHRISTIAN NAME***	***AGE***	***ADDRESS***	***PLACE OF BAPTISM***	***DATE***

The above Candidates were confirmed by me ……

TOTAL NUMBER OF CANDIDATES ……

THIS FORM TO BE PREPARED IN DUPLICATE, ONE COPY TO BE SENT TO THE BISHOP A MONTH BEFORE CONFIRMATION, THE SECOND TO BE HANDED TO THE BISHOP AT THE CONFIRMATION.