

Today's Date: _____

**All Saints' Church
14851 Gideon Drive
Woodbridge, Virginia 22192**

CONFIRMATION, RECEPTION OR REAFFIRMATION

Full Name _____

Address: _____

Phone: _____ E-Mail: _____

First Name you wish the Bishop to address you by: _____

Date of Birth: _____ City/State of Birth _____

Date of Baptism: _____ City/State of Baptism: _____

In what denomination? _____

Were you an adult when you were baptized? Yes _____ No _____

Previously Confirmed? _____ Date _____

In what denomination? _____

Have you ever been Confirmed or Received into the Anglican Church?

Yes _____ No _____ If Yes, Date and Church _____

I wish to:

Be Confirmed (meaning that I have not previously made an adult, public profession of faith in Jesus Christ through Confirmation or adult baptism): _____

Be Received into the Anglican Church (meaning that I have previously made an adult, public profession of faith in Jesus Christ in another denomination): _____

Reaffirm my Baptismal Vows meaning that
(a) I have previously been Confirmed or Received into the Anglican Church and at this time I wish to reaffirm my faith in Jesus Christ; _____

or

(b) I was baptized as an adult in the Anglican Church and have not been Confirmed. _____