

APPLICATION FOR CONFIRMATION



The Parish of
St Mary the Virgin
 STANWELL
 &
St Matthew
 ASHFORD

Candidate

<i>Christian name(s)</i>	<i>Surname</i>	<i>Date of Birth</i>
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<i>Contact name and address</i>	<i>Telephone numbers</i>
	<i>E-mail</i>

Mother	<i>Name</i>	<i>Occupation</i>
	<i>Name</i>	<i>Occupation</i>
Father	<i>Date of Baptism</i>	
	<i>Place of Baptism</i>	

Please return to:
The Parish office
 Muncaster Close
 Ashford, Middlesex
 TW15 2EE
 ☎ 01784 252459
 ☎ 01784 259093
 ✉ office@smam.org.uk

<i>Signature</i>	<i>Date</i>
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If you wish to be contacted in the future regarding events in the parish that may be of interest to you, please mark this box.

For Office Use ONLY: DC AC C/R REF