HOLY FAMILY EPISCOPAL CHURCH

Candidate Information Form

For Baptism, Confirmation, Reception, or Reaffirmation

RITE REQUESTED

☐ Baptism	☐ Confirmation	☐ Reception	☐ Reaffirmation

CANDIDATE INFORMATION

Full legal name: _____	Preferred name: _____
Date of birth: _____	Place of birth (city/state or country): _____
Street address: _____	Pronoun(s): _____
City: _____	State: _____ ZIP: _____
Email: _____	Phone: _____

PARENT OR GUARDIAN — COMPLETE FOR A MINOR

Parent/guardian 1 — full legal name: _____	Relationship: _____
Parent/guardian 2 — full legal name: _____	Relationship: _____
Best parent/guardian phone or email: _____	

BAPTISMAL RECORD — REQUIRED FOR CONFIRMATION, RECEPTION, OR REAFFIRMATION

Have you been baptized with water in the Name of the Father, Son, and Holy Spirit? ☐ Yes ☐ No ☐ Unsure	
Date of baptism (exact or approximate) : _____	Denomination: _____
Church and city/state of baptism: _____	
Name of officiating minister, if known: _____	

PRIOR CONFIRMATION — COMPLETE FOR RECEPTION OR REAFFIRMATION

Have you previously been confirmed by a bishop? ☐ Yes ☐ No ☐ Unsure	Date (exact or approximate): _____
Denomination: _____	Church and city/state: _____
Name of confirming bishop, if known: _____	

SPONSORS, PRESENTERS, OR GODPARENTS

Name 1: _____	Name 2: _____
Name 3 (if applicable) : _____	Relationship to candidate (optional) : _____

SERVICE AND PARISH RECORD — PARISH USE

Date of rite: _____	Service time: _____	Register/page: _____
Officiant/bishop: _____	Certificate prepared: ☐ Yes	ChurchTrac updated: ☐ Yes
Notes or records still needed: _____		

Please return this form to the parish office. Information will be used to prepare the service and maintain the parish sacramental register.