\*The following were presented at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Church, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(location)

\*Date of Bishop’s Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **^**If more space is needed use page 2  **\*Make sure this is filled in.**

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| **\*Full name**  **Please print** | \*Date of Birth | Place of Baptism if know | \*When a member is Received tell us from what denomination they are received. | \* If multiple congregations are present for confirmation please indicate from which congregation the confirmand is a member. |
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