

# GALILEE CHURCH

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## Confirmation Information Please Print

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address (Including Zip Code): \_\_\_\_\_  
\_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Email: \_\_\_\_\_

I wish to be: Confirmed \_\_\_\_\_  
Received \_\_\_\_\_  
Reaffirm my Baptismal Vows \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth \_\_\_\_\_  
(City and state)

Date of Baptism: \_\_\_\_\_

Place of Baptism: \_\_\_\_\_  
(Church and Address)

If Baptism took place somewhere other than Galilee, please provide a Baptismal Certificate or a letter from the parish.

Sponsor's Name: \_\_\_\_\_

Parent's Names: \_\_\_\_\_

**Please return to the church office as soon as possible to be registered for the next Confirmation Service.**

**Thank you.**