



BUKIT BATOK PRESBYTERIAN CHURCH
21 BUKIT BATOK STREET 11
SINGAPORE 659673
TEL 6569-9030

Please
paste a
passport
size photo
HERE

CONFIRMATION

Full Name: (Dr/Mr/Miss/Mdm) _____
(Christian name in () may be added after I/C name)

Address: _____
_____ **Singapore** _____

Email Address: _____ **Mobileph No:** _____

Country of Birth: _____ **Marital Status:** _____

Occupation: _____ **Month & Year of Birth:** _____

Date of Infant Baptism: _____ **Name of Church:** _____

How long have you been worshipping in BBPC? _____

Please share with us your reasons for wanting to be confirmed? _____

FAMILY MEMBERS (names)

Father _____

Mother _____

Brothers / Sisters _____

Wife _____

Children _____

NOTE: Minimum age for confirmation is 16 years old.

**** By signing below, I give consent to the collection & processing of my personal information for the purpose of applying for CONFIRMATION in this church**

Date: _____ **Signature:** _____