



ST HILDA'S CHURCH OF ENGLAND HIGH SCHOOL

CONFIRMATION OF CHRISTIAN WORSHIP FORM FOR ADMISSION TO YEAR 7 IN SEPTEMBER 2025

INSTRUCTIONS FOR RETURNING THE FORM:

- Complete and save this document
- Email to applications@st-hildas.co.uk
- Please email from the official church email address
- Closing date: Thursday 31st October 2024

Please note that we do not accept worship forms from personal email addresses.
If you are experiencing any issues, please contact St Hilda's direct.

We strongly recommend the details are discussed with the parent/carer before submission.

Please provide information only about attendance **at your own church**, drawing either on your own personal knowledge or (if you were not at the church at the time) on information you have been able to **confirm personally** with other church officials.

Please ensure the information is as accurate as possible. Please feel free to contact school in the event of any query. All references are no longer confidential. Thank you.

CHILD'S SURNAME:	
CHILD'S FIRST NAME(S):	
CHILD'S DATE OF BIRTH:	
NAME OF PARENT / CARER: (A carer is defined as someone who has parental responsibility for the child)	

How often does the parent/carer attend church and how often does the child attend church?
Please tick the most appropriate attendance pattern in the table below.

Worship is deemed to be attendance at public worship on Sundays or other days of the week which is open to the public and which is free to attend.

THIS PART OF THE FORM IS TO BE COMPLETED BY THE FOLLOWING:

Vicar, Priest, Pastor, Minister, Lay Eucharistic Minister, Catechist, Deacon or Church Warden.

Please select the relevant attendance pattern below for both parent and child for 2022, 2023 and 2024.

If the parent or child did not attend your church during this period please select the 'Never' option.
Please do not leave the below section blank.

Attendance Pattern	2022		2023		2024	
	CHILD	PARENT	CHILD	PARENT	CHILD	PARENT
WEEKLY						
3 TIMES A MONTH						
FORTNIGHTLY						
MONTHLY						
OCCASIONALLY						
NEVER						

Additional Notes:

Please indicate below if your church does not offer a weekly service and / or use this section to highlight any issues or concerns with attendance patterns.

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FULL NAME:	
POSITION HELD:	
NAME AND ADDRESS OF CHURCH:	
DENOMINATION:	
TELEPHONE NUMBER:	
EMAIL ADDRESS – AS SHOWN ON CHURCH WEBSITE:	