

ST HILDA'S CHURCH OF ENGLAND HIGH SCHOOL

CONFIRMATION OF CHRISTIAN WORSHIP FORMFOR ADMISSION TO YEAR 7 IN SEPTEMBER 2026

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: Friday 31st October 2025

Please note that we <u>do not</u> 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 2023, 2024 and 2025.

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	20	2023		2024		2025	
	CHILD	PARENT	CHILD	PARENT	CHILD	PARENT	
WEEKLY							
3 TIMES A MONTH							
FORTNIGHTLY							
MONTHLY							
OCCASIONALLY							
NEVER							

Please indicate below if your church does not offer a weekly service and / or use this section to highlight any

Additional Notes:

issues or concerns with attendance patterns.

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