

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE
BISHOP'S OFFICE ONE MONTH PRIOR TO THE VISIT:**

c/o Heidi Pizzuto
71 Bronson Avenue
Ottawa, ON K1R 6G6
bishopsoffice@ottawa.anglican.ca

PARISH VISITS/CONFIRMATION INFORMATION SHEET			
The Right Reverend John H. Chapman			
Name of Parish Priest			
Name of Parish (Full Name) and Address: - N.B. in the event of multi point parishes, please indicate the name of the church where the event will take place			
Parish Visit <input type="checkbox"/>	Confirmation <input type="checkbox"/>	Date	Time AM/PM
Readings <small>(Revised Common Lectionary Propers)</small>		Colour of the Day	
Confirmation Candidate (Full Legal Name)	Candidate Address	Baptism Date	Age
Recent Past or Upcoming Events			
Any Pertinent Information the Bishop should be aware of			
Relevant Trivia			
Map to the Location is Enclosed for the Bishop <input type="checkbox"/>			