





New Deacon Ordination Request

Request Date:	
Candidate Name:	
Candidate Date of Birth:	
Contact Parent's Name (if minor) *:	
Address:	
Phone Number:	
Email Address:	
Hymns Class Teacher's Name:	
Hymns Class Teacher's Signature:	Date:
Priest's Approval:	Date:
* Parent Consent الله Parent Consent الله Parent Consent الله Parent Consent الله الله الله الله الله الله الله الل	or) into the order of deaconship. I take full ring him to services early, to bring him to him to honor and respect the church as the nents of Holy Communion and Repentance reverence. Help me O Lord! هذا أقرار منى بالمواققة على رسامة أبنى فى طقس النالمساعدة أبنى فى النمو فى هذه النعمة. أتعهد بأحضار ما الأحد. وأن أعلمه أحترام وتوقير الكنيسة كبيت الله وه
Parant's Signature.	Data