



63 Roberts Line  
Palmerston North

Phone: (06) 356 5452  
Fax: (06) 356 5452  
Email: supervisor@cornerstone.ac.nz

Date:

Dear Church leader

### Confirmation of Regular Worship at a Christian Church

I am seeking your help with our enrolment process.

The \_\_\_\_\_ family have requested the enrolment of their child/ren at Cornerstone Christian Preschool. I would appreciate you taking the time to complete the confirmation below and either:

- return this directly to the applicant, or
- post it to the above address.

Please feel free to contact me on the number above if you have any questions or concerns regarding this confirmation.

With you in advancing His kingdom,

Marion Sheed  
Supervisor

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I confirm that the \_\_\_\_\_ family **regularly** worships at \_\_\_\_\_  
(Church)

and adheres to the Christian faith.

\_\_\_\_\_  
(signed)

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
(Contact phone)

\_\_\_\_\_  
Church title (e.g. Pastor, Reverend, Elder)