APPLICATION FOR FEE EXEMPTION

CHURCH IN ESPOO
EVANGELICAL LUTHERAN CHURCH OF FINLAND

Participant's information

Participant's surname	Given names
Personal ID number	Phone
Parti.cipant's address and postal code	Participant's email

Guardians' information

1st guardian's name gaa	Phone
Address and postal code (if different from the participant's) gag	Guardian's email
2nd guardian's name	Phone
Address and postal code (if different from the participant's)	Guardian's email

To which confirmation camp do you apply for fee exemption?

Name and date of confirmation camp	Organising parish

Financial situation

Annual net income of the guardians

0€ - 10 000€ ☐
10 000€ - 20 000€ ☐
20 000€ - 30 000€ ☐
30 000€ - 40 000€ ☐
40 000€ - 50 000€ ☐
50 000€ - 60 000€ ☐
60 000€ - ☐

Number of members of the same household

Additional circumstances that may affect the overall financial situation of the guardian(s). If needed, continue overleaf.

_____ Place and date

_____ Signature

Decision (filled out by staff)

Acceptor	Decision	
Date of decision	Applicant informed of the decision	Demand for rectification attached ☐

Please, send the form to the parish organising the confirmation camp where the applicant intends to participate. You can find the addresses of the parishes at www.espoonseurakunnat.fi.

9/2023