



# ST. THOMAS' EPISCOPAL CHURCH

The Rev. Todd Foster, Rector

212 North Main St  
Glassboro, NJ 08028-1919

856.881.9144  
office@stthomasglassboro.org

<http://www.stthomasglassboro.org>

Date: \_\_\_\_\_

**To the Rector of:**

\_\_\_\_\_

(previous parish)

\_\_\_\_\_

(street address of previous parish)

\_\_\_\_\_

(city, state, zip code of previous parish)

**Please send an official letter of transfer to:**

Parish Administrator  
St. Thomas' Episcopal Church  
212 North Main St  
Glassboro NJ 08028-1919

**For the following member or members:**

\_\_\_\_\_

(name, also name at baptism/confirmation if different than current name)

\_\_\_\_\_

(additional family member to be transferred)

\_\_\_\_\_

(additional family member to be transferred)

\_\_\_\_\_

(additional family member to be transferred)

\_\_\_\_\_

(additional family member to be transferred)

\_\_\_\_\_

(additional family member to be transferred)

**Thank you.**

\_\_\_\_\_

(signature of person requesting transfer)



## LETTER OF TRANSFER

*This is to certify* that the person(s) whose name(s) appear below is (are) registered or enrolled in:

\_\_\_\_\_ Church,  
\_\_\_\_\_,  
in the Diocese of \_\_\_\_\_, as

Adult Members (16 or Older)	Date of Birth	Date of Baptism	Active Member	Communicant in Good Standing	Date of Confirmation/Reception
			Yes / No	Yes / No	
			Yes / No	Yes / No	
			Yes / No	Yes / No	
			Yes / No	Yes / No	

Younger Members	Date of Birth	Date of Baptism	Active Member	Communicant in Good Standing (if applicable)	Date of Confirmation/Reception (if applicable)
			Yes / No	Yes / No	
			Yes / No	Yes / No	
			Yes / No	Yes / No	
			Yes / No	Yes / No	

I, the undersigned, do hereby transfer the above-named Member(s) to the spiritual charge of the Rector (or Minister) of the Parish or Congregation of **St. Thomas' Episcopal Church, Glassboro**

\_\_\_\_\_ in the Diocese of **New Jersey**, pursuant to the provisions of the Canon "Of Regulations Respecting the Laity."

Please acknowledge the acceptance of this Letter of Transfer. Upon receipt of acknowledgement, the name(s) of the Member(s) will be removed from the Register of the Parish.

Given under my hand (and seal), this \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_\_\_\_.

(Signed) \_\_\_\_\_  
(Rector) (Minister) (Warden)

New Address (if known): \_\_\_\_\_