FORM OF APPLICATION for Admission of Children as required by the Committee of the PROTESTANT INFANTS' HOME, MONTREAL.

	Answers.	VOUCHED FOR BY
Name, Mother		
Age, "		
Where born, "		
Religion, "		
Address of Parent		
Amount board agreed on		
By whom recommended		
How long resident in Canada		
Name, Child		
Date of birth		
Where born		
When vaccinated		
" baptized		
From which Institution		

PROTESTANT INFANTS' HOME.

Ihereby	surrender my Child
agedto the Pr	otestant Infants' Home for adoption.
S	IGNED,
V	VITNESS,
Montreal	. 187