

SACRAMENTAL CERTIFICATE REQUEST FORM

St. John the Baptist Catholic Church
835 2nd Avenue NW
New Brighton, Minnesota 55112
Phone: 651-633-8333 Fax: 651-633-7404
www.stjohnnb.com

To request a sacramental certificate, please complete this form and return to the parish office. Requests must be made in writing, unless the request is being made by a diocesan or parish official.

In order to protect the confidentiality of these records, St. John the Baptist Catholic Church can only release sacramental certificates to the individual named on the certificate (or the next of kin if deceased), or to their parent or legal guardian if the named person is under the age of 18.

No certificates are issued for genealogical purposes

Name of the person whose certificate is being requested:

_____ (_____) Date of Birth _____
Last First Middle Maiden

Name of the person requesting certificate: _____

Relationship to the person whose certificate is being requested: Self _____ Parent of a minor child _____

Requesting: _____ Baptismal Certificate	_____
	Date Sacrament Conferred
_____ First Communion Certificate	_____
	Date Sacrament Conferred
_____ Confirmation Certificate	_____
	Date Sacrament Conferred
_____ Marriage Certificate	_____
	Date Sacrament Conferred
_____ Holy Orders	_____
	Date Sacrament Conferred

Requester's Contact Information:

Address: _____

Daytime Phone: _____ Email address: _____

_____ I would like the certificate mailed to the above address.

_____ I will pick up the certificate in the parish office. Please call me when it is ready.

I certify that I have read the above information and that I am requesting my own certificate or that of my minor child.

Signature _____ Date _____

Office use only: _____ Identification viewed _____ Date certificate sent: _____