

REQUEST for a COPY of a CERTIFICATE for:

___ Baptism ___ First Communion ___ Confirmation, ___ Marriage
(please mark X in front of the sacrament certificate you are requesting)
from Our Lady of Refuge Roman Catholic Church

(We will honor this request made only by the individual person, parents, grandparents because this is a legal document)

All requests must be made in clear printing and signed.

NAME of Person: Baptized, received Holy Communion, Confirmed, Married:

_____ **Place of birth:** _____

Date of birth: _____ **Month** _____ **Day** _____ **Year** _____

Date this person received the sacrament: _____

Full name of parents of the person whose certificate is requested:

Mother's maiden name: _____

Father: _____

Full Names of Godparents / Sponsors / Witnesses:

1) _____

2) _____

A \$10.00 contribution would be appreciated to cover clerical costs.
Our Lady of Refuge Church, 2020 Foster Avenue, Brooklyn, NY 11210 Thank You.

Certificate Requested by: _____ **Phone:** _____
SIGNATURE of Individual, Parent, Grandparent

Date of request: _____

_____ **I will pick up this letter:** _____

Print name of the one who will pick it up

_____ **Please mail to this address:** _____

Please PRINT clearly