



CHURCH OF ST. MONICA
New York City

FORM TO REQUEST A CERTIFICATE

NAME OF PERSON making this request

(MI)

REQUESTING a certificate of

Baptism Confirmation Marriage Other: _____

RELATIONSHIP OF REQUESTOR to person whose record is being sought

NAME OF PERSON whose record is sought

(MI)

NAME OF PARENTS

Father: _____

(Last Name)

(First Name)

Mother: _____

(Last Name)

(First Name)

DATE AND PLACE OF BIRTH

DATE AND PLACE OF CEREMONY

NAMES OF SPONSORS/WITNESSES

NAME AND ADDRESS TO WHOM THE CERTIFICATE IS TO BE SENT

PHONE CONTACT FOR ADDITIONAL INFORMATION

(Area Code)

ADDITIONAL INFORMATION / NOTES
