

**Sacramental Certificate Request**

St. John Bosco Parish

In order to protect the confidentiality of these records, certificates will only be issued to the individual named on the certificate, the parent or guardian of a minor child, or a requesting parish.

**No certificates are issued for genealogical purposes.**

Please Print Clearly

Full name at time of baptism \_\_\_\_\_

Father's Full Name \_\_\_\_\_

Mother's Full Maiden Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age at Baptism/Date of Baptism \_\_\_\_\_

Godfather \_\_\_\_\_ Godmother \_\_\_\_\_

Holy Communion \_\_\_\_\_

Church \_\_\_\_\_ City/State \_\_\_\_\_ Date \_\_\_\_\_

Confirmation \_\_\_\_\_

Church \_\_\_\_\_ City/State \_\_\_\_\_ Date \_\_\_\_\_

Marriage \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_ Date \_\_\_\_\_

Requesting:       Baptismal Certificate               First Communion Certificate  
                          Confirmation Certificate               Marriage Certificate

Person requesting certificate \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Reason for Request:       sacramental       annulment       civil purpose

To be valid, certificates must be mailed to you; they cannot be emailed or faxed.

Please return request with a stamped, self-addressed #10 (business size) envelope to:

St. John Bosco Parish  
23830 Front Avenue  
Mattawan, MI 49071  
(269) 668-3312