



Church of St. Dominic
216 Spring Street North
Northfield, Minnesota 55057
(507) 645-8816

SACRAMENTAL RECORD CERTIFICATE REQUESTS

Please complete this form to the fullest extent possible.

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 or diocese.

No certificates are issued for genealogical purposes.

Full Name of person whose certificate is being requested: _____

Date of Birth _____

Other names by which this person has been known (maiden name, etc.) _____

Name of the person requesting the certificate: _____

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

Requesting:

- Baptismal Record Date Sacrament Conferred _____
- First Communion Record Date Sacrament Conferred _____
- Confirmation Record Date Sacrament Conferred _____
- Confirmation Record Date Sacrament Conferred _____
- Marriage Record Date Sacrament Conferred _____
- Holy Orders Record Date Sacrament Conferred _____

Requestor's Contact Information

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone # _____ Email address: _____

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: _____

The Sacramental Record should be mailed to:

Name of Church _____

Attention of: _____

Address: _____

City: _____ State: _____ Zip: _____

Please allow at least 10 days for processing.

 For office use only

Rec'd by _____

Date rec'd _____

Date mailed: _____