

Sacramental Request Form

Sacred Heart Parish, 1739 Ferry Avenue, Camden, NJ 08104

(856) 966-6700 Fax: (856) 756-0102

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, a requesting parish or a diocesan institution.

No certificates are issued for genealogical purposes.

Full name at baptism: _____

Father's full name: _____

Mother's full maiden name: _____

Date of Birth: _____ Place of Birth: _____

Age at Baptism: ____ Date of Baptism: _____ Church of Baptism: _____

Holy Communion: _____

Church City/ State Date:

Confirmation: _____

Church City/State Date:

Marriage: _____

Church City/ State Date:

Requesting: __ Baptismal Certificate __ First Communion Certificate
 __ Confirmation Certificate __ Marriage Certificate

Person requesting certificate _____

Address: _____

Phone: _____

I have read the above information and certify I am requesting my own certificate, or that of my minor child, or I am from a requesting parish of Diocesan Institution.

Signature: _____ Date: _____

Reason for Request: __ Sacramental __ Annulment __ Civil Purpose

To be valid, certificates must be mailed. They cannot be emailed or faxed.
Please return this completed form by mail or fax to the address above.