

SACRAMENT CERTIFICATE REQUEST

Is there a Sacrament Certificate Donation?

Yes, \$10 per certificate (*Cash / Check made payable to: St. Elizabeth Ann Seton Church*).

How long until Certificate is ready for pick-up?

Between 5-7 business days (*Excludes Holidays, Holy Days & Weekends*). The Church Office will call or email you when your Requested Sacrament Certificate is ready for pick-up. We may mail by request only as the certificate may get damaged or lost in the mail. We recommend to pick-up the certificate in the Parish Center; Monday-Friday: 9:00 a.m. to 8:00 p.m., Saturday: 9:00 a.m. – 5:00 p.m. or Sunday: 9:00 a.m. to 2:00 p.m.

I am getting married; do I need a new Certificate of Baptism with notations?

Yes, please completely fill out the Request for Sacrament Duplicate form. You may not use the Certificate of Baptism from your childhood. When getting married you need a recent copy of the Certificate of Baptism with notations dated within 6 months of the date of the wedding.

If you have any questions, please call the Parish Center at (626) 964-3629.



ST. ELIZABETH ANN SETON CATHOLIC CHURCH

1835 LARKVANE RD, ROWLAND HEIGHTS, CA 91748-2503

PHONE: (626) 964-3629 • FAX: (626) 913-2209

EMAIL: STELIZABETHANNSETON@YAHOO.COM

If you were baptized, received First Eucharist, were confirmed or married at St. Elizabeth Ann Seton Parish, we are happy to supply a copy of your Sacramental Record. If you have any questions or concerns, feel free to contact the Parish Center at (626) 964-3629.

REQUEST FOR SACRAMENT CERTIFICATE

Today's Date: _____ Request Received by Office Staff: _____

Sacrament Certificate/s is/are for the purpose of: _____
(Example: Marriage, Religious Education Program, Confirmation Program, Personal Use, Sponsor, School, Annulment, etc.)

Full Name of Individual Requesting Certificate/s: _____
(First Name, Middle Name, Last Name)

Address: _____ Apt/Unit/Ste/Spc: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Email: _____

What is your relationship to the individual on the record? (Please Mark One):
() Self () Parent () Legal Guardian () Other (Please Specify): _____

How do you want the certificate/s delivered? (Please Mark One):
() I want to pick up certificate/s at Parish Center. () I want certificate/s mailed to my address.

Signature of Individual Requesting Certificate/s: _____ Date: _____

Please note the Request for Sacrament Certificate takes 5-7 Business Days to process. (Excludes Weekends, Holy Days and Holidays)

Which Sacrament Certificate/s are you requesting? (Please Mark All That Apply)

SACRAMENT CERTIFICATE	TOTAL NUMBER OF COPIES REQUESTED	DATE OF SACRAMENT	THIS COLUMN FOR OFFICE USE ONLY
() Certificate of Baptism	How many copies are you requesting?:	Date of Sacrament (MM/DD/YYYY): Or Approximate Year (YYYY):	Baptism Register Volume: Page: _____ Line: _____ Prepared by: _____ Date: _____ Date Mailed/Picked Up: _____
() Certificate of First Communion	How many copies are you requesting?:	Date of Sacrament (MM/DD/YYYY): Or Approximate Year (YYYY):	First Communion Register Volume: Page: _____ Line: _____ Prepared by: _____ Date: _____ Date Mailed/Picked Up: _____
() Certificate of Confirmation	How many copies are you requesting?:	Date of Sacrament (MM/DD/YYYY): Or Approximate Year (YYYY):	Confirmation Register Volume: Page: _____ Line: _____ Prepared by: _____ Date: _____ Date Mailed/Picked Up: _____
() Certificate of Marriage	How many copies are you requesting?:	Date of Sacrament (MM/DD/YYYY): Or Approximate Year (YYYY):	Marriage Register Volume: Page: _____ Line: _____ Prepared by: _____ Date: _____ Date Mailed/Picked Up: _____

Full Name as appears on the Certificate: _____ Date of Birth: _____
(First Name, Middle Name, Last Name) (MM/DD/YYYY)

Father's Full Name: _____
(First Name, Middle Name, Last Name)

Mother's Full Name: _____
(First Name, Middle Name, Maiden Last Name)

*** THIS SECTION FOR REQUEST FOR CERTIFICATE OF MARRIAGE ***

Full Name of Groom as appears on the Certificate of Marriage: _____ Date of Birth: _____
(First Name, Middle Name, Last Name) (MM/DD/YYYY)

Full Name of Bride as appears on the Certificate of Marriage: _____ Date of Birth: _____
(First Name, Middle Name, Last Name) (MM/DD/YYYY)