



St. John's Archdiocese Inc.
Archives and Research
Baptism Request Form

Request date: _____

Parish and community in which marriage was performed:	
Surname:	Given name(s):
Birth date:	Baptism date:
Father's name:	Mother's name:

Name of person making the request:	
Email address:	Telephone number:
Payment information	Check of money order attached
Credit card number:	Expiry date: Security code:

Fee of \$75.00 must accompany this form

Send to:
Address:
City, Province/State, Postal Code:

Office use only	
Ref. number:	Request completed on:
Payment received:	Mailed/emailed on: