

Date Mailed:

## umption of the Blessed Virgin Mary Parish Our Lady of the Lake Church 10930 Alder Drive, Truckee, CA 96161 \*

(530) 587-3595 \* Fax (530) 582-8648

BAPTISMAL CERTIFICATE REQUEST FORM (* Require		
Full Name of person baptized:(As show on the original certificate)		_
Date of Birth (MM/DD/YY):/ * Date Requested:	/	_/
Father's Full Name:		
Mother's Full Maiden Name:		
Church of Baptism: [ ] Assumption Parish [ ] Our Lady of the Lake Please Check One)		
Date of Baptism:/ Name of Priest: If known) (If known)		_
Name of Person Requesting:		
Relationship to the person baptized:(If not the person baptized)		
Contact Information of the Person Requesting:  Phone: E-mail:		
Fax:		
Name and Address for Mailing:  Name:  Address for Mailing:		
Address:		
Send Certificate by: Mail [ ] Fax [ ] or Pick-Up [ ] (Choose one)		
Signature:		
Comment/s:		
For office use only:		

Date Faxed:

Date Picked-up: