St. Sylvester Parish,

2915 West Palmer Chicago, Illinois 60647

Sacramental Records Release Form

Request Date:

r				
Sacram	e nt: Baptism	First Communion	Confirmation	Marriage
Name at the time of Sacrament:				
Date of Sacrament (At least an approximation):				
Date of Birth:				
Name of Father:				
Name of Mother (Maiden):				
Person Requesting Information:				
rerson requesting information.				
Name:				
Address:				
City, State, Zip Code:				
Telephone (During the Day):				
Send the Certificate to: (Please fill out only if you do not want to pick up the certificate)				
Name:				
Address	:			
City, State, Zip Code:				
Attention:				
Signature:				
Only the per	son who received the Sacrament,	their parents, godparents, or leg	al guardian can request these	e documents and sign here.
SUGGESTED NON-REFUNDABLE DONATION:				
 \$10.00 Per Certificate (Waiting period approximately 4-6 days) \$15.00 Per Rushed Certificate (Waiting period approximately 2-3 Days) 				
				aysı
	20.00 Per Certificate re	quested for Genealogic	ai rurposes	
For Official Use Only:				
Donation	Paid: Ca	ash / Check / Credit Pic l	ked Up: 🗆 Date Mailed	1:

Initials:

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Book #: