**SACRAMENTAL CERTIFICATE REQUEST FORM**

**Directions for completion:**

* Please complete all parts and please use block capitals
* Please provide us with as much information as possible
* Please attach copies of identification documents, where appropriate. Please see the attached schedule for further information.

**Part 1 – Details of Sacrament & Contact Details**

Please tick the relevant box to indicate which certificate you require**:**

Baptismal Confirmation

Wedding

Name of Person who received the sacrament: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Sacrament: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(of person who received the sacrament)

Parents/Guardians names: (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(where appropriate) (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Godparents’ names: (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(where appropriate) (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:(The certificate will be sent to this address unless you collect the certificate or request the certificate to be sent to another address.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If you are making the request on behalf of someone else:**

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_ Your Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 2 – Reason for Request**

**Please tick one**

School enrolment First Communion

Confirmation Marriage

Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 3 – Identification**

Please tick the relevant box, as appropriate.

I am making the request for my own sacramental certificate

and I am an adult aged 18 or over

**I am making the request as a parent on behalf of a child under 18**

**I am making the request as a guardian of a child under 18**

**I am making the request as a Power of Attorney for an individual**

**aged 18 or over**

Please tick the box to confirm that you have attached copies of

relevant identification documents, as outlined in the Schedule.

**If you are personally known to a member of clergy or parish staff please ask the parish priest in the parish that is issuing the certificate to complete the Declaration in Section**

**5 below. You may still need some identifying documents – see attached Schedule.**

**Part 4 - Sign and date**

Signature of Requester \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return the completed form by post to Newtown Road, Waterford or by email to parishofficejbm@gmail.com

**Part 5 – Declaration as to identity**[[1]](#footnote-1)

**I hereby certify that, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, [insert name of person requesting the document in block capitals] is personally known to me or is introduced to me by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, [insert name of person making the introduction in block capitals] who is personally known to me.**

**Signature of Parish Priest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_**

**Privacy Notice**

The parish of SS. Joseph & Benildus & St. Mary’s is the data controller for the data you provide on this form and can be contacted at Newtown Road, Waterford. By signing this form, you consent to the parish of SS. Joseph & Benildus & St. Mary’s collecting and processing the data on the form for the purposes of providing you with a sacramental certificate. The data contained in this form is stored for 6 years from the date of the sacramental certificate request. For further information, please see the parish’s Privacy Policy.

**Schedule**

**Information regarding identification documents**

|  |  |  |
| --- | --- | --- |
| **No.** | **Relationship with the person whose sacramental certificate you are requesting** | **ID required** |
| **1** | **Requesting the certificate on your own behalf and you are an adult aged 18 years or over**[[2]](#footnote-2) | **Please provide the following: -**   1. **The completed declaration at part 5 of the sacramental request form; OR** 2. **A copy of current passport OR current drivers’ licence; AND utility bill dated within the last 6 months** |
| **2** | **Requesting the certificate as a parent on behalf of a child aged under 18 years** | **Please provide the following in respect of the parent:**   1. **The completed declaration at part 5 of the sacramental request form; OR** 2. **Copy of current passport; OR current drivers’ licence; AND utility bill dated within the last 6 months.**   **AND Pease provide the following in respect of the child:**   1. **Copy of the child’s birth certificate** |
| **3** | **Requesting the certificate as a legal guardian on behalf of a child aged under 18 years** | **The documents listed at number 2 above AND a copy of the document evidencing appointment as legal guardian.** |
| **4** | **Requesting the certificate as a power of attorney appointed in respect of an adult aged 18 years or over** | **Please provide a copy of the following for both adults:**   1. **The completed declaration at part 5 of the sacramental request form in respect of both adults; OR** 2. **A copy of current passport; OR current drivers’ licence; AND utility bill dated within the last 6 months;**   **AND copy document appointing power of attorney.** |

**For office use only**

* Has the Sacramental Certificate Request Form been completed in full?
* Has proof of identification & address been provided?
* If no proof of identification/address has been provided,

has the declaration re identity been completed?

* Has the requester signed the form?
* Date request was received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Request entered in Sacramental Certificate Request Register
* Additional Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Date request completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Details of any follow – up required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. To be completed by Parish Priest, if applicable. [↑](#footnote-ref-1)
2. A person may only be given their own sacramental certificate, except as outlined. [↑](#footnote-ref-2)