

# Request for Certificate

Cert Requested on \_\_\_\_\_

Cert Processed on \_\_\_\_\_

Cert Collected on \_\_\_\_\_

Type of Certificate Requested

**Baptism**

**Confirmation**

**Marriage**

(please circle as appropriate)

Name(s) (in full): \_\_\_\_\_

(name(s) on certificate)

Mother's Full Name

Before Marriage: \_\_\_\_\_

Parents names: \_\_\_\_\_

Date of birth

Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

Date of ceremony (if known)

Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

Name of church: \_\_\_\_\_

Certificate requested by: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Certificates within 50 years – one week.

Certificates older than 50 years – please send SAE and donation. Details will be sent ASAP.

## Request for Certificates

➤ All requests for certificates older than 50 years must be submitted in writing – to include the following:

1. All known details including names and dates
2. Stamped Addressed Envelope
3. Donation towards search – non-refundable.  
Suggested donation is €10 for certificates over fifty years old and €5 for certificates less than fifty years old.

- Cheques/postal orders payable to "Restoration Fund" *or*

- Lodge directly to Bank of Ireland Account name "Restoration Fund" *or*

Account number: 32609742; Sort Code: 90-00-92; BIC: BOFIE2D;

IBAN: IE08 BOFI 9000 92326097 42

- Online on <http://www.StMichansRC.ie> using the  Certificates button which will give PayPal options

➤ The information must be addressed to the

Parish Office

St. Michan's Church

Halston Street

Dublin 7 D07 FX92

Alternatively, a completed **Request for Certificate** form can be submitted in person in the Parish Office, St. Michan's Church, Halston Street, Dublin 7 D07 FX92, along with the required donation (see above).

I request a copy of

**My Baptism Certificate**

**My son/daughter's Baptism Certificate\***

Name .....  
(BLOCK CAPITALS)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Photographic identification produced

Yes

**\*in the case of minor**

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I authorise ..... (BLOCK CAPITALS)  
to collect this certificate on my behalf.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Photographic identification produced

Yes