

**Request for Baptismal Certificate
Our Lady of Providence**

Name of Adoptee: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

Phone: H: _____ W: _____ Message: _____

Adoptive Parent's Name: _____

Person requesting Baptismal Certificate (please check appropriate designation and fill out accompanying information):

Adoptee: _____

Adoptive Parent: _____

Name: _____

Address _____

City/State/Zip _____

Phone: H: _____ W: _____ Message: _____

Clergy: _____ Name: _____ Parish: _____

Diocese: _____ Address: _____

City/State/Zip: _____

Phone: H: _____ W: _____ Message: _____

Please be advised that the adoptee or adoptive parents will need to send a copy of the adoptee's birth certificate along with this request.

Signed _____ **Date** _____