



# Holy Name Catholic Church

3814 Nash Blvd  
San Antonio, TX 78223  
Phone: (210) 333-5020  
Website: <http://www.holynameusa.org>

## CERTIFICATE REQUEST

**Date of Request:** \_\_\_\_\_

Full Name (Maiden Name if married): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**SACRAMENT: Page #** \_\_\_\_\_, \_\_\_\_\_

Baptism                      Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_

With Notations              Godparent(s) \_\_\_\_\_ Priest: \_\_\_\_\_

First Communion              Date of First Communion: \_\_\_\_\_

Confirmation              Date of Conf.: \_\_\_\_\_ Sponsor: \_\_\_\_\_ Saint: \_\_\_\_\_

Marriage                      Date of Marriage: \_\_\_\_\_

Parents: Father's Name: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

I PICKED UP INDICATED DOCUMENTS.

PRINT NAME: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

DATE: \_\_\_\_\_

### OFFICE USE ONLY

**Note:**

**Documentation Fee: \$10.00**      Cash: \$ \_\_\_\_\_      Check # \_\_\_\_\_      Receipt # \_\_\_\_\_      By: \_\_\_\_\_