

Guardian Angels Roman Catholic Church
10630 Creditview Road, Brampton, Ontario, L7A 0T4
Tel. 905.970.9175Parish Ref. Code:FORM-General RequestLast Reviewed:27January2020

Rev. 0.0

PLEASE PRINT CLEARLY:

Requested by:	Tel. #:	E	Email:	
☐ BAPTISM CERTIFICATE	☐ FIRST HOLY COMMU	NION CERTIFICATE	□ CONFIRMAT	TION CERTIFICATE
LAST NAME OF CHILD		FIRST NAME OF CHILD (if applicable)		
Year Sacrament was Received:		Name of Child's School:		
☐ MARRIAGE CERTIFICATE				
LAST NAME, FIRST NAME	OF HUSBAND MAI	DEN NAME, FIRST NAI	ME OF WIFE	DATE OF MARRIAGE
NOTE: FEE: \$10 per certificate	☐ Paid			