

# St. Bartholomew the Apostle Parish

2032 Westfield Avenue – Scotch Plains, NJ 07076

Tel: (908) 322-5192 – Fax: (908) 322-2598 Email: [contact@stbartholomewchurch.org](mailto:contact@stbartholomewchurch.org)

## Sacramental Record Request

*Please complete the form then mail or fax it to St. Bartholomew.*

### ***Information About the Person who Received a Sacrament at St. Bartholomew the Apostle Church***

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Maiden Name (If Applicable): \_\_\_\_\_

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

Sacrament (s) Received:    Baptism       First Holy Communion       Confirmation       Marriage

If known, the date(s) the Sacrament(s) were made:

\_\_\_\_\_

### ***Who Is Making This Request?***

Full Name: \_\_\_\_\_

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

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

### ***Who Are We Mailing This Record To?***

Full Name: \_\_\_\_\_

If being sent to a church, the Name of the Church: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone # (if known): \_\_\_\_\_

Email (if known): \_\_\_\_\_