

# St. Polycarp Catholic Church

8100 Chapman Ave.  
Ph: (714) 893-2766

www.stpolycarp.org

Stanton, CA 90680  
Email: info@stpolycarp.org

## Certificate Request Information

Please fill out the Certificate Request Form below.

1) There is a charge of (\$10.00 - Cash/Check) / (\$12.00 - Credit Cards) for each certificate requested.

- You can stop in the office (Monday - Friday - 10AM to Noon or 2 – 5PM) to pay for same.
- To mail a check: (Do Not Mail Cash)
  - Mail to St Polycarp Catholic Church, 8100 Chapman Ave., Stanton, CA 90680
  - Make the check payable to St. Polycarp Catholic Church.
  - Include the information requested on the Certificate Request form below.
- For Credit Card Payments. Email the following information to us at info@stpolycarp.org
  - Credit Card Company Name \_\_\_\_\_
  - Type of Card – Visa / Master Card / Etc. \_\_\_\_\_
  - Card Number & Security Code on back of card. \_\_\_\_\_ / \_\_\_\_\_
  - Name as shown on Card \_\_\_\_\_
  - Billing Address for Card \_\_\_\_\_

2) To obtain your requested certificate: (We will contact you when it is ready to be picked up.)

- You can pick up the certification in the office (Monday - Friday - 10AM to Noon or 2-4PM)
- We can mail the certification via US Mail.
- We can text you a photocopy of the certificate or email a PDF copy to you.

### CERTIFICATE REQUEST

Baptism: \_\_\_\_\_ First Communion: \_\_\_\_\_ Confirmation: \_\_\_\_\_

Information taken by: \_\_\_\_\_ Date: \_\_\_\_\_

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

First

Middle

Last

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

Child of: \_\_\_\_\_ and \_\_\_\_\_

Sponsors: \_\_\_\_\_ and \_\_\_\_\_

Baptism Date: \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

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

Confirmation Date: \_\_\_\_\_

Minister: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Will pick up: YES \_\_\_\_\_ NO \_\_\_\_\_ ( \$10.00 fee payment is required prior to pick up or mailing.)

Requesting Party: \_\_\_\_\_ Tel: \_\_\_\_\_ Cell: \_\_\_\_\_