

Application for Children's Sacramental Mass

Due November 17, 2016

Candidate Information

First Middle Last

Date of Birth _____ Place of Birth _____

Date of Baptism** : _____ Name of Church : _____

Church Address:

Street City State/Zip

**** A copy of the baptismal certificate must accompany this form.**

You can request a copy of the baptismal certificate from the parish of baptism by mail or phone. They can usually FAX a copy to our parish office. The Parish FAX number is 703 221-3246

Parents of Candidate Information

Mother's Full Maiden (unmarried) Name: _____

Father's Full Name: _____

Street City State/Zip

Home Phone: () _____

Parent Email: _____