

ARCHDIOCESE OF WINNIPEG  
Archives  
**SACRAMENTAL RECORDS RELEASE FORM**  
**Baptism Record**



1495 Pembina Hwy  
Winnipeg, Manitoba R3T 2C6  
204 452-2227

Request Date: \_\_\_\_\_

<b>Name of Parish In Which Baptism Was Performed:</b> <i>(if outside Winnipeg, please state the name of the town)</i>	
<b>Name at time of Baptism:</b>	
<b>Last Name:</b>	<b>Given Names:</b>
<b>Date of Birth:</b>	<b>Approximate Date of Baptism:</b> <i>(i.e. as an infant, young adult, etc.?)</i>
<b>Name of Father:</b>	
<b>Name of Mother:</b>	

<b>Name of Person Making the Request:</b>	<b>Relationship to the Recipient of Sacrament:</b>
<b>Address:</b>	
<b>City, Province, Postal Code:</b>	
<b>Daytime Telephone Number:</b>	<b>Signature of Person Making Request</b>

<b>Briefly state the purpose of obtaining this record</b>
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<b>Send to:</b>
<b>Address:</b>
<b>City, Province, Postal Code:</b>
<b>Attention:</b>

Fee of \$15.00 Per Search Must Accompany This Form

For Office Use:

<b>Fee Paid: (Receipt #)</b>	<b>Date Mailed</b>	<b>Researcher:</b>
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**Please mail to:** Archives  
Catholic Centre  
1495 Pembina Hwy  
Winnipeg, Manitoba R3T 2C6