SEARCH REQUEST ANGLICAN CHURCH DIOCESE OF MOOSONEE

| | 0 (HST included) for each certifica rentian University). When sending | | |
|-------------------------|--|--------------------------|----------------|
| RECIPIENT: | *Surname | | * Given Name |
| | | | |
| *Street | *City/Tov | wn | *Province |
| *Postal Code | | *Telephone | |
| Email address | | | |
| assert that I am the ab | pove listed recipient and have attach | ed proof of identificati | on. |
| | | | (Signature) |
| *PURPOSE OF REQ | UEST: | | |
| Example: genealogy, p | proof of baptism, reinstatement of st | atus, insurance, pensio | on plan, etc.) |
| Please send to: Archiv | ves, Laurentian University 935 Ramsey Lake Road Sudbury, ON Canada P3E 2C6 | | |
| | | | |
| REGISTER FOR TH | E PARISH OF: | | |
| | | | |
| | *Name of Church | 1 | |

BAPTISM BURIAL *Name *Name *Parents Child of or Spouse of *Date of Death *Residence *Date of Birth Date of Funeral *Date of Baptism *Place of Funeral Sponsors _____ Officiating Clergy **MARRIAGE** *Bridegroom *Bride Age Age Place of Birth Place of Birth Religious Denomination Religious Denomination *Name of Parents *Name of Parents *Place of Marriage *Date of Marriage Officiating Clergy **PARISH HISTORY** What kind of information do you wish to obtain? Other pertinent information: