ST. DOMINIC'S CATHOLIC CHURCH REQUEST FOR "LETTER OF GOOD STANDING"

Today's date:		
Name:		
Address:		
City:	State:	Zip Code:
Phone:		
Registered parishioner:	Yes	☐ No
Please look up name. If pers we cannot write a letter of §		*
Sacrament: Baptism	Confir	mation Marriage
Who will receive the Sacra	ament?	
Your role? Parent	Godparent	☐ Sponsor ☐ Fiancé/e
Date of Sacrament:		
Church Contact Name:		
Title:		
Name of Church:		
Address:		
City:	State:	Zip Code:
Phone number:	Fa	x number:

Letters will be sent directly to the church. Please allow 5-10 days for request to be processed.