INSTRUCTIONS – PLEASE READ CAREFULLY

To obtain a Certificate or a Certified Transcript of Information contained in a Parish Register, an application form must be filled out and presented to the Diocese of Montreal.

A Certificate and/or Certified Transcript may be issued ONLY to individuals mentioned in these documents, or to individuals who prove their interest. Besides identifying themselves, individuals requesting a Certificate or Certified Transcript in which they are not mentioned must provide one of the following documents:

- Warrant of a Power of Attorney;
- Ruling for protective supervision of a person of full age;
- Declaration establishing their interest in obtaining the Certificate or Certified Transcript;

Identification of Applicant: Individuals requesting a Certificate or a Certified Transcript must provide two pieces of identification: At least one of these must bear a photograph of the applicant (ex. driver’s licence, Medicare Card, valid passport), and at least one must indicate their home address (ex. invoice from any utility company or cable company). In the case of a mail request, a photocopy of the documents will be accepted.

A Certificate or a Certified Transcript cannot be issued without submission of a fully completed application form. Please include the full legal names of parents, as well as the maiden name of the mother, in the case of a baptism. Parish registers are often hand-written and it can be difficult to decipher the handwriting – the information you provide may prevent your mother’s name of Bernice being transcribed as Clarence.

The fee for a Baptismal, Marriage or Burial Certificate is $25 CAD, and $20 for Confirmation Certificates. Payment can be made by cheque, money order, VISA or Mastercard (or cash, if picked up in person). Cheques must be paid to the order of: The Synod of the Diocese of Montreal. Please add $2 for an electronic version of the certificate(s). An additional $5 is required to cover the fees the bank charges for USD transactions.

NOTE: The archives will conduct a search upon payment of the nominal fee for research and handling; this fee is non-refundable in the event a record was not found.

Once completed and signed, the form may be submitted with payment as follows:

Archives
Anglican Diocese of Montreal
1444 Union Avenue
Montreal, Quebec H3A 2B8

Tel.: 514-843-6577, ext 248
Fax: 514-843-6344
E-mail: archives@montreal.anglican.ca
IMPORTANCE: Please fill out this form with a pen, in block letters. Use full names, including middle names.

| APPLICANT – Individual to whom the document(s) will be sent | NOTE: Power of Attorney on p. 3 |
|-------------------------------------------------------------|
| Name:____________________________________________________|
| Address:__________________________________________________|
| No. Street Municipality                                    |
| Postal/Zip Code Province/State Country Telephone Email      |
| Relation of the Applicant to the person named in the record:|
| Reason for request: _____________________________________ |
| Historical Research: _____________________________________ |

**BAPTISM – Complete with information concerning the person in whose name the document will be issued.**

Surname according to the Act of Birth or Baptism: ____________________________

First & middle name(s):________________________ Date of birth: ______________

Place of baptism: __________________________ Date of baptism: ______________

Father’s name(s): __________________________ Mother’s name(s): __________________________

**MARRIAGE – Complete with information concerning the marriage and spouses.**

Date of marriage: __________________________

Bride’s name: __________________________ Groom’s Name: __________________________

Place of marriage (parish, municipality): __________________________

**BURIAL – Complete with information concerning the deceased.**

Name: __________________________

Date of death: ______________ Place of burial: __________________________

**CONFIRMATION – Complete with information concerning the confirmand.**

Name: __________________________

Date of confirmation: ______________ Place of confirmation: __________________________

**SIGNATURE:** ___________________________________________ **DATE:** __________________________

Last Update 04 July 2018
POWER OF ATTORNEY
(To be completed only when mandating someone to request the certificate on your behalf)

I, the undersigned, (thereafter referred as “Principal”) _________________________________ Write your first and last names in block letters

Residing at: ________________________________________________________________

No. Street Municipality Province/State Country

Give mandate to: ____________________________________________________________

First and last names of the legal representative

Residing at: ________________________________________________________________

No. Street Municipality Province/State Country

To require in my name: □ My baptism certificate □ My marriage certificate □ My confirmation certificate

□ The baptism certificate of the following person ________________________________

□ The confirmation certificate of the following person ______________________________

□ The marriage certificate of the following person ________________________________

□ The burial certificate of the following person ________________________________

In consequence thereof, I authorize my legal representative to RECEIVE ON MY BEHALF the CERTIFICATE OF BAPTISM, CONFIRMATION, MARRIAGE OR BURIAL requested on the front of this form, providing my personal information as required.

Signed at: ___________________________ on: ___________________________

Municipality Province/State Country Date

Signature of the Principal: ________________________________________________

FOR OFFICE USE ONLY

Completed request form, ID and fees received: □

Form received by: _______________________________________________________

Certificate or Transcript mailed □ picked-up □

on (date) ___________________________