



### Application Form for Baptism Record

This form must be filled out, signed, and returned via email or mail before the baptism search will be undertaken. A paper form will be mailed to you, if requested. For best results, please submit all requested information.

For requests dated from 1915 and earlier, the name of the Church does not need to be known. For requests dated after 1915, the name of the Church **must** be included. If not known, please inquire with family or friends, research the town or neighbourhood you or your kin resided in, and provide your “best guess.” The Archives will search the records of up to 3 Churches. If date is not known, please provide approximate range of years.

#### Who May Receive Records?

Please check the box below that applies to you and complete the information (on reverse). Please note your search may take up to 8 weeks to complete.

- a) Anyone if the baptism occurred more than 100 years ago
- b) Person named on record
- c) Parent or guardian named on record
- d) Person with written authorization of b) or c) – **See below**

What is your relationship to the person whose information you are requesting? \_\_\_\_\_

e) Immediate next of kin (spouse, child, parent or sibling) where person named is deceased. My relationship is \_\_\_\_\_

f) Person with valid reason where person named and immediate next of kin are deceased. My reason is \_\_\_\_\_

#### Consent to Release Information

If you are requesting information about another person and require their written authorization, the following section must be completed and signed by them or a signed letter of consent must be attached to this application.

I, \_\_\_\_\_, (*print name of person entitled to information*) give my consent to release the requested information to \_\_\_\_\_ (*print name of authorized representative*).

\_\_\_\_\_  
*Signature of person entitled to information*      *Date*

**There is a \$20 fee for each baptism record search, which must be paid regardless of whether the search is successful.**

Searches are free of charge for all Indigenous peoples. Fee will be waived if the cost is an undue hardship.



Along with this form, please mail a cheque payable to Prairie to Pine Regional Council and note “archives fee for service” in the memo line. Or send an e-transfer to: prairietopine@united-church.ca It is automatically deposited, so we do not have to have a prearranged password. Please indicate in the message box (if you have that option) that it is a fee for service for archives.

If you wish to provide additional financial support to the Archives to help us preserve our holdings, then a donation would be gratefully accepted. A receipt for income tax purposes will be issued for donations of \$25.00 or more.

May we contact you with a future donation request: Yes  No

**Please provide the following information to the best of your ability:**

Last Name at time of Baptism: \_\_\_\_\_

Given Names: \_\_\_\_\_

Date of Baptism (month/ day/ year): \_\_\_\_\_

Date of Birth (month/ day/ year): \_\_\_\_\_

Place of Baptism (City/ Town/ Village): \_\_\_\_\_

Name of Church (required): \_\_\_\_\_

Full Name of Parent One (maiden name if mother): \_\_\_\_\_

Full Name of Parent Two (maiden name if mother): \_\_\_\_\_

Any additional information: \_\_\_\_\_

Reason for request: \_\_\_\_\_

Urgent: Yes  No

**Applicant’s Agreement**

I agree that the information provided to me will be used for the reason stated above and will not be used for any unlawful or improper purposes:

Applicant’s name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Applicant’s signature: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing address: \_\_\_\_\_

I’d prefer a copy: Mailed  Emailed  Both