



St. Julie Billiard Parish

We truly welcome Christ revealed in every person!

First Communion Certificate Request Form

(Please print legibly)

Your Name _____

Father's Name _____

Mother's Name (Maiden Name) _____

Place of Birth _____ City of Birth _____

Birthdate _____ Day _____ Year _____

Date of First Communion _____

Godfather's name _____

Godmother's name _____

Name and address where you want the certificate to be mailed

Phone No _____

Email Address _____

*A donation to **St. Julie Billiard parish** for **\$ 20.00** (cash or check) for processing the certificate request.*

*Please make your check payable to St. Julie Billiard Parish and
send check to 366 St. Julie Dr., San Jose, CA 95119*

Kindly indicate name of person requesting in the memo field of the check.