



ST. MICHAEL THE ARCHANGEL
CATHOLIC PARISH

Infant Memorial Form

Human Life Committee

Engraving Request Form

MONUMENT IN MEMORY OF
BABIES BORN INTO HEAVEN



Engraving requests will be submitted to the engraver on the 2nd Friday of each month. It may take up to two weeks from submission for the engraver to add a name to the monument.

Baby's first name: _____

Middle initial: ____

Last name: _____

Your name: _____

Phone number

(only if we have questions): _____

Date: _____

Return this completed form and a check for \$150 to the Parish Office (payable to St. Michael Parish).
Please write on the outside: Attn: Human Life Committee- Kim Coutinho

Office Use Only

Form Received Date: _____	Received By: _____
Payment Received Date: _____	Received By: _____