
Date

Our Lady of Lourdes Catholic Church
11291 S.W. 142 Avenue
Miami, FL 33186

Attn: Msgr. Kenneth K. Schwanger, Pastor

Dear Msgr. Schwanger;

I, _____, hereby grant my permission for my child (ren) listed below to receive the Sacrament of Baptism, Communion or Confirmation through the Roman Catholic Church at Our Lady of Lourdes Parish.

The name(s) of my child (ren) is (are):

Four horizontal lines for writing the child's name.

Sincerely,

SWORN and SUBSCRIBED
Before me this _____ day
of _____, _____.

NOTARY PUBLIC, State of _____

My commission expires: _____