ARCHDIOCESE OF WINNIPEG ARCHIVES
1495 Pembina Hwy
Winnipeg, Manitoba
R3T 2C6
204 452-2227
Fax: 204 453-8179

SACRAMENTAL RECORDS RELEASE FORM ~ Marriage

Request Date: _____

ALL FIELDS ARE REQUIRED. If you do not know all details, contact archives@archwinnipeg.ca for assistance prior to submitting your request. Ensure the church/parish is within the Archdiocese of Winnipeg region.

Name of Parish in Which Marriage Was Celebrated: *(if outside Winnipeg, please state the name of the town)*	
Groom: *Last Name:*	*First Names:*
Bride: *Last Name:*	*First Names:*
Date of Marriage:	

Name of Person Making the Request:	This is a record of (please circle or indicate): myself / parent / grandparent / other:_____
Mailing Address:	
Email Address:	
Daytime Telephone Number:	Signature of Person Making Request

Briefly state the purpose of obtaining this record:

Send to (name):

Address (if different from above):

If record is less than 75 years old and is not your own, we require authorization from one of the individuals on the record (or next-of-kin) to release the certificate. They must complete the section below.

Name of Person Providing Authorization: _____

Signature Authorizing Record Release:

Phone number (may be used for verification):	This is a record of (please circle or indicate): myself / parent / grandparent / other:_____

FEE OF $50.00 PER SEARCH MUST ACCOMPANY THIS FORM

Do not mail cash. Address cheques or money orders (in Canadian dollars) to: *Archdiocese of Winnipeg*

Records searches may take several months to complete from date received.

For Office Use:

Fee Paid: (Receipt #)	Date Mailed	Researcher:

Effective 01/11/2026

Please mail to: **Catholic Centre - Archives**
1495 Pembina Hwy
Winnipeg, Manitoba
R3T 2C6