

CERTIFICATE OF ELIGIBILITY FOR CATHOLIC GODPARENT(S)

GODPARENT FOR: _____
(Name of person being baptized or confirmed)

NAME OF ADDRESS & PARISH: _____
(Parish where Baptism or Confirmation to be held)

GODPARENT INFORMATION

I _____ affirm that:
(Please print first and last name)

- I am at least 16 years of age.
- I am a practicing Catholic registered at a parish.
- I have received the sacraments of Baptism, First Holy Communion, and Confirmation in the Catholic Church.
- I regularly participate in the Mass on Sundays and Holydays and receive the Sacraments of Eucharist and Reconciliation.
- I regularly contribute to the financial needs of the parish.
- If married, I am validly married according to the laws of the Catholic Church. If divorced, I have not remarried outside the Catholic Church.
- I actively strive to live out my commitment to Christ and the Church's community life through my loving response to those with whom I come in contact.
- I realize I assume a great responsibility before God and the Church in becoming a Godparent and will faithfully fulfill its obligations. I will support the person I am Godparenting by my prayers and the Christian example of my daily life.

By my signature, I attest to be a practicing Catholic who seeks to be admitted as a Godparent and solemnly affirm that I fulfill the requirements of the Catholic Church for this role as presented above. With God's grace, I intend to continue practicing my Catholic Faith, and I will, to the best of my ability, carry out the obligations of my role as Godparent.

(Godparent Signature)

(Date)

TO BE COMPLETED BY THE GODPARENT'S PARISH

This is to certify that _____ is
a registered member of the above-stated parish.

_____ is in good standing in this parish and that he/she meets the requirements for being
a Godparent.

_____ is registered in our parish as an active, practicing Catholic.

Priest Signature _____

Date: _____

Church of _____

Address _____

Phone # _____