

CERTIFICATE OF ELIGIBILITY FOR CATHOLIC GODPARENT

GODPARENT FOR _____

PARISH WHERE BAPTISM IS TO BE HELD:

NAME OF PARISH: _____

ADDRESS: _____

PHONE NUMBER: _____

TO BE COMPLETED BY GODPARENT

I, _____, affirm that:

(Please initial all that apply)

_____ 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 Holy Days, and receive the Sacrament of Reconciliation to confess serious sins at least once a year.

_____ 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 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 GODPARENT'S PARISH

This is to certify that _____

- is a registered member of the above-stated parish.
- is not a registered member of the above-stated parish.
- was registered here at one time but is now inactive according to our records.

(Priest signature)

(Date)