



Godparent Eligibility Form

Full Name of Child to be Baptized:

(First Name)

(Middle Name)

(Last Name)

Statement of the Godparent:

I am a practicing **Catholic** who has received the Sacraments of **Baptism, Confirmation** and **Eucharist**. I promise to share my faith with my godchild to the best of my ability, by good example, by practicing my Catholic faith, and by loving God and my neighbor.

If married, I received the Sacrament of Holy Matrimony according to the norms of the Catholic Church. Yes No
Place and date of marriage/convalidation: _____

Complete ALL Godparent Information Below:

(First Name)

(Middle Name)

(Last Name)

() - _____

(Phone)

(Email Address)

Signature of Godparent

Statement of Godparent's Pastor:

The above named individual is a registered and practicing member of:

(List the name, address, city, state, zip code, and telephone number of the church)

Church Seal

(Signature of Priest)

(Title)

(Date)