



# HOLY FAMILY

7321 BURKITTSVILLE ROAD + MIDDLETOWN MARYLAND 21769

301.473.4800 • Fax: 301.371.6810 • www.hfccmd.org

## GODPARENT/SPONSOR ELIGIBILITY STATEMENT FOR BAPTISM/CONFIRMATION

Name of person to be Baptized or Confirmed: \_\_\_\_\_

Sacrament to be received: \_\_\_\_\_

### *To be completed by Godparent/Sponsor*

By initialing below, I certify that all of the following statements are true:

- \_\_\_\_\_ I am a Catholic and at least 16 years of age
- \_\_\_\_\_ I am not the mother or father of the one to be Baptized/Confirmed
- \_\_\_\_\_ I have received the Sacraments of Baptism, Eucharist and Confirmation
- \_\_\_\_\_ I am married and my marriage is recognized by the Catholic Church or I am single.
- \_\_\_\_\_ I regularly participate in Mass on Sundays and Holy Days of Obligation
- \_\_\_\_\_ I lead a life "in harmony with the faith to be undertaken"

Sponsor's name (please print): \_\_\_\_\_

Sponsor's address: \_\_\_\_\_

Sponsor's phone: \_\_\_\_\_

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

### *To be completed by Pastor of Sponsor's parish*

I verify that \_\_\_\_\_ is a registered member of this parish and to the best of my knowledge is eligible to serve in the role as godparent/sponsor as indicated above.

Pastor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parish: \_\_\_\_\_ City/State: \_\_\_\_\_

