

# St. Patrick Catholic Church

9149 Elys Ford Rd., Fredericksburg, VA 22407 (540) 785-5299

INTERNAL USE ONLY:

\_\_\_ Parish Office \_\_\_ R. Education

INTAKE INITIALS: \_\_\_\_\_

## GODPARENT ELIGIBILITY CERTIFICATE

PERSON to be BAPTIZED: \_\_\_\_\_

DATE of BAPTISM: \_\_\_\_\_

Being a godparent is not just an honor given to a good friend or relative. Canon Law requires that godparents must be Catholics in good standing who can support the parents in the challenges of raising the child in the Catholic faith.

As a godfather/godmother:

YES NO I am at least 16 years of age and mature enough to undertake this responsibility.

YES NO I have received the three sacraments of Catholic initiation: Baptism, Eucharist, and Confirmation.

YES NO I know the fundamental truths of the Faith, and I am a practicing Catholic in good standing. If I have school-age children, they have received the sacraments of the Church and are attending faith formation.

YES NO I support St. Patrick Church with my weekly offerings and attend every Sunday and on all Holy Days of Obligation. I receive the sacraments of Eucharist and Penance regularly.

• I do not attend St. Patrick Church, but I attend: \_\_\_\_\_ OR \_\_\_\_\_ I do not attend church.

NAME OF CHURCH: \_\_\_\_\_

YES NO I am NOT the father or mother of the one to be baptized (unless serving as a proxy). YES=NOT a parent; NO=parent

YES NO I am canonically free to carry out this office. This means that:

\_\_\_\_\_ I am married, and my marriage has been blessed in the Catholic Church.

CHURCH: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

OR \_\_\_\_\_ I am not living with a partner (co-habiting) without being validly married in the Church.

**Your signature below confirms the following:** *I declare that I am a participating member of the Catholic Church, and I fulfill all the requirements of Canon Law listed above to be a godparent. I promise that I intend to faithfully carry out my duty to serve as an exemplary member of the Catholic faith and to help the person I sponsor to lead a Christian life.*

\_\_\_\_\_ **Godparent Signature**

\_\_\_\_\_ **Godparent Name PRINTED**

\_\_\_\_\_ **Godparent Phone**

\_\_\_\_\_ **Godparent Email**

Church where baptism will take place: \_\_\_\_\_

Church address: \_\_\_\_\_  
street address city state zip

### TO BE COMPLETED BELOW BY THE GODPARENT'S PASTOR AND SEALED WITH THE SEAL OF THE PARISH.

I certify that the above person may serve as a godparent for the sacrament of Baptism.

\_\_\_\_\_  
Pastor's Signature (or Pastor's designee)

\_\_\_\_\_  
Date

Parish Seal  
REQUIRED!