

4325 Don Julio Boulevard North Highlands, CA 95660 Telephone: 916.332.4777 ♦ Fax: 916.332.8325 www.stlawrencenh.org

## **Diocese of Sacramento**

## From the Code of Canon Law

- Baptismal Godparents must be Catholics who have been confirmed and have received the Sacrament of Most Holy Fucharist.
- They must be free from canonical penalty and must lead
   a life in harmony with the faith in keeping with the function
   to be undertaken. (Canon #874 & Canon #893)

## **BAPTISMAL GODPARENT ELIGIBILITY FORM**

Name of Child to be Baptize: _				
Name of Godfather:			Cell:	
NAME OF GODMATHER:			Cell:	
Address:		City:	State:	Zip:
'm a parishioner at	me of Parish , Pari	sh, located atAddres	s	
City/State	sinc	Date		
In accordance with the g  IUST COMPLY WITH ALL REQUIR  I am at least 16 years of a  I have celebrated the Sac  I participate in Catholic	EMENTS. Please READ age. craments of Baptism, Ho	<del>-</del>	g affirmations which	apply to you:
► Please complete one of the following: □ IF SINGLE, living without a partner;			Please attach a recent copy of baptismal certificate with annotations.	
	☐ IF MARRIED	): My marriage was celebra	ted in the Catholic Churc	h: Please attach copy of marriage certificate.
<ul><li>I understand the responsible</li><li>I affirm that I meet all the</li></ul>		taking and have both the ments to act as Godpar		to fulfill it faithfully.
Date	Signature of Godfather		Signature of Godmother	
► I have completed the Bapti	sm Preparation Class	at the following church:		
				n
Address	City	State	Zip Code f class taken elsewhere, pleas	Date
			i class taken elsewhere, piea	se attach vermeation letter.
To be filled out by the Pastor of	r Deacon of the Godpar	ents' Parish.		
NOTE: Godparent, please	take this form to your	parish for affirmation by	your priest, or deacon.	
To the best of my knowledge, the Catholic initiation of another.		lfill the responsibilities i	nvolved in sponsoring t	he
ignature:		Title:		
Parish/Location:				
Date:				Church Seal