



Godparent/Sponsor Affidavit

Name of person to receive sacraments (print): _____

Name of Godparent/Sponsor (print): _____

Address: _____ City/State: _____ Zip: _____

Email: _____ Phone: _____

The role of a Godparent/Sponsor is to offer both support and witness to the person's conversion and readiness to receive the sacraments of the Roman Catholic Church. This is accomplished by accompanying the inquirer to special rituals and events, and offering encouragement, prayer, and Christian example. Church law requires that Godparents/Sponsors be people who are living the Catholic faith and meet the following qualifications (Canons 872-874):

Please Initial Each

- _____ I am at least 16 years of age.
- _____ I am a practicing Catholic who has received the three sacraments of initiation: Baptism, Holy Communion, and Confirmation.
- _____ As a practicing Catholic, I attend Mass on Sundays and Holy Days of Obligation.
- _____ If I am married, my current marriage is a valid Catholic marriage. I was married in _____ at _____
(City / State / Country) (Name of Roman Catholic Church)
- _____ I am not the parent of the person to receive the sacraments.

I hereby declare that I am a registered member of the Catholic parish named below and that I meet the above qualifications to be a Godparent/Sponsor.

Signature of prospective Godparent/Sponsor: _____ Date: _____

- I am a registered member of St. Elizabeth Ann Seton Roman Catholic Church, Las Vegas, NV.
- I am a member of another Parish.

Your parish is to complete the information below.

I certify that (print) _____ is a registered member of our parish.

Parish Name: _____

Parish Seal

Address: _____ City/State: _____

Signature of Pastor / Delegate: _____ Date: _____