Godparent / Sponsor Form

Your Full Name:_____

Godparent/Sponsor for:_____

We thank you for accepting the invitation to be a Godparent of Sponsor. We pray it will be a Grace-filled experience for you. Please read the following statements, which are derived from the Code of Canon Law #874. Place your initials next to each paragraph and sign the acknowledgement at the bottom of this page.

_____ I understand that as a Godparent or Sponsor I am to live a life in harmony with the nature of this responsibility. This means that I regularly attend Mass; I receive the Eucharist regularly; I make use of the Sacrament of Reconciliation; I am not in an irregular marriage; and I seek to be faithful to the teachings of the Catholic Church. I support the ministry of my parish.

_____ I attest that I have received the Sacraments of Eucharist and Confirmation, that I am at least 16 years old, and that I am <u>not</u> the parent of the individual being Baptized and/or Confirmed.

_____ I understand that being a Godparent or Sponsor is a commitment of time. I will attend any required sessions for catechesis, celebrations of liturgical rites, and other initiation-related events to the best of my ability. I also understand that this is a lifetime commitment to be, as I am able, a faithful witness of the Catholic way of life to the individual I am called to serve. This includes, but is not limited to, prayer for and with the person I am sponsoring, and helping him/her to live their life as a follower of Jesus.

_____ I am required to obtain a letter of good standing from my parish, attesting to the fact that I attend Mass regularly on Sundays and on Holy Days of Obligation, follow the precepts of the Church, and possess no impediments for serving as a Godparent or Sponsor. This form may serve as my letter of good standing, provided my pastor's signature is obtained.

I hereby accept the responsibilities listed above and testify that I fulfill the requirements to serve in the role of a Godparent or Sponsor.

_____ _____

Signature Date

(The reverse side of this form must be completed and include the signature of your pastor.) →

YOUR CONTACT INFORMATION

Street Address: _____

City: _____ State: _____ Zip: _____

Best Contact Phone: _____ ☐ Home ☐ Mobile

Best Contact Email: _____

YOUR SACRAMENTAL HISTORY

Sacraments Received: ☐ Baptism ☐ Eucharist (First Holy Communion) ☐ Confirmation

ENDORSEMENT BY YOUR PARISH

The above-mentioned individual is a registered member of our parish, meets the requirements as outlined on this form, and has permission to be a Sponsor or Godparent. Should you need any further information or reference regarding this individual, please do not hesitate to contact the parish office.

_____ _____

Signature of Pastor / Administrator Date

For all parishes other than St. Pius X in Greensboro, please include the parish name, contact information, and affix the parish seal below.

Name of Parish: _____

Printed Name of Pastor: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Parish Seal

For Sacraments celebrated at St. Pius X Catholic Church, the original copy of this form should be returned to:
The Office of Faith Formation, 2210 North Elm Street, Greensboro, NC 27408