



HOLY REDEEMER
CATHOLIC CHURCH
Faith Formation- Baptism

1603 N THACKER AVE
KISSIMMEE, FL 34741
(407) 847-2500
HREDEEMER.ORG

Baptism Checklist

What needs to be done to baptize my child?

Parent (s) to do list:

- ☐ Turn in a copy of my Child's Birth Certificate.
- ☐ Fill out and turn in a completed *BAPTISMAL REGISTRATION FORM*.
- ☐ Give the suggested donation of \$50 for materials and seminar.
- ☐ Attend a Baptism preparation class

Godparent to do list:

- ☐ Fill out and turn in *GODPARENT ELIGIBILITY FORM*. (One for each Godparent)
- ☐ Attend a Baptism preparation class

Requirements to be a Godparent:

- ⇒ To be a Godparent you must fulfill the following requirements:
1. You must be at least 16 years of age.
 2. You must have celebrated your Baptism, Confirmation, and First Communion.
 3. You must be a practicing Catholic. This includes participation in the Mass every Sunday.
 4. You must be a Catholic who is in good standing with the Church. For example, if you are married you must be married in the Catholic Church.

Other Information

- ⇒ All documents must be submitted to establish a date for baptism. Please do not make any arrangements with family and friends before the baptismal date has been confirmed. We will NOT accept partial or incomplete forms. Please submit all necessary paper work by dropping them off at the office or mailing them.
- *BAPTISMAL REGISTRATION FORM*
 - Copy of Child's Birth Certificate
 - Proof of custody, if applicable.
 - If not registered at Holy Redeemer, a letter of permission to have your child baptized at Holy Redeemer from your home parish.
 - *GODPARENT ELIGIBILITY FORM* (One for each Godparent)



HOLY REDEEMER
CATHOLIC CHURCH

1603 N THACKER AVE KISSIMMEE, FL 34741
(407) 847-2500 EXT 212



Baptism Registration Form

Today's Date: _____

Name Of Child: _____
First Middle Last

Date Of Birth: ____/____/____ Sex: ☐ Male ☐ Female

Place Of Birth: _____
City State Country

Address: _____
City State Zip code

Father's Name: _____
First Middle Last

Email: _____ Phone Number: _____

Mother's Name: _____
First Middle Maiden Name

Email: _____ Phone Number: _____

Who has guardianship of child? _____

Do both parents agree to the Baptism of this child? ☐ YES ☐ NO

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Are you a registered member of Holy Redeemer? ☐ YES ☐ NO

If the answer is NO, list in which parish you are registered and provide a permission letter from your parish.

Church Name _____ City _____ State _____ Country _____

Godfather's Full Name _____
First Middle Last

Godmother's Full Name _____
First Middle Last

(Please submit the *Godparent Eligibility Form* for **EACH** godparent)

For Office Use Only

Date Received _____ Received By _____ Birth Certificate _____ Donation _____ Parent's Parish Registration _____ Sponsor's Parish Registration _____

Godfather Form _____ Godmother Form _____ Godparent Class _____ Godparent Parish Letter _____ Parent Class _____ Parent Parish Curtesy Letter (if applicable) _____

Date of Baptism _____ Time _____ Celebrant _____ Book _____ Line# _____ Pg# _____



GODPARENT ELIGIBILITY FORM

Child's full name: _____

MEANING AND ROLE OF GODPARENT:

You have been asked to be a godparent for someone for baptism. The purpose of a godparent is to ensure that the rich and beautiful faith of the Church is passed on to the person in the most loving and authentic way possible. In accepting this very important role, you are urged to reflect upon the importance of this commitment. Please read the following and pray about the responsibility you will fulfill in someone's spiritual life. After reflection, please complete the top part of this form by checking the boxes and filling in the form completely. Please then bring this form to your parish of registration. That parish will fill out the bottom portion of this form.

From the Code of Canon Law: A godparent for the Sacrament of Baptism must be a Catholic who has received the Sacraments of Baptism, Eucharist and Confirmation. 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. (Canons #874 & 893)

Name of Church where Sacrament will take place: _____

REQUIREMENTS FOR A GODPARENT:

I have received the three Sacraments of Initiation of the Roman Catholic Church:

- ☐ 1. Catholic Baptism-Date and Church where Baptized: _____
- ☐ 2. Catholic Holy Communion -Date and Church of First Communion: _____
- ☐ 3. Catholic Confirmation-Date and Church where Confirmed: _____
- ☐ I am at least sixteen years of age or older.
- ☐ If married, I have received the Sacrament of Marriage in the Catholic Church (or Convalidation in the Catholic Church)
Date and Church of marriage: _____
- ☐ If single, I am not living with someone outside of marriage
- ☐ I participate regularly in Sunday Mass and Communion as a practicing Roman Catholic. I celebrate the Sacraments of Reconciliation at least once a year. I have given witness to my faith in Jesus Christ in word, deed and strive to live out my commitment to the Gospel message. I intend to continue the practice of my Catholic faith.
- ☐ I am a registered member of _____ In (City, State) _____
and fulfill my obligations to the parish to the best of my ability.
- ☐ I promise to give support to _____ (candidate's first name) by my prayers, my continued interest in his/her Catholic growth, and by the Christian example of my daily life.

GODPARENT AGREEMENT:

I do hereby solemnly declare that I do fulfill all the requirements to act as a godparent for the Sacrament of Baptism.

Godparent name (please print): _____

Godparent Email: _____ Phone Number: _____

Signature: _____ Date: _____

(This part is to be filled out by the Church of the godparent)

This certifies that the above-named person is known to me as a parishioner in good standing. I testify that he/she is qualified to serve as a godparent for the Sacrament of baptism.

Church of Godparent:	_____
Parish	Church's Street: _____
Seal	Church's City, State, Zip: _____
	Pastor's Name: _____
	Pastor's Signature: _____
	Date: _____



GODPARENT ELIGIBILITY FORM

Child's full name: _____

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Seal	Church's City, State, Zip: _____
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	Pastor's Signature: _____
	Date: _____