



OUR LADY OF THE HOLY ROSARY CHURCH
44450 HWY. 429
ST. AMANT, LA 70774
(225) 647-5321 (225) 647-5322 {fax}

BAPTISM OFFICIAL WITNESS CERTIFICATE OF ELIGIBILITY

Sponsor's Name: _____

Name of Sponsor's Church Parish: _____ City/State of Church: _____

Sponsor's Signature: _____

Name of child to be baptized: _____

OFFICIAL WITNESS COMMITMENT FORM

_____ I have **never** been baptized in the Catholic Church.

_____ I am a Christian baptized at _____ Church.

_____ I practice my religion on a regular basis and promise to be a role model to support the parents of this child.

Signature of Witness _____ Date: _____

PASTOR'S CERTIFICATION

This is to certify that _____ is an active member
of _____ Church

Pastor's Signature: _____ Date: _____