\$10 Fee Paid

Baptismal Registration Form

Please make sure a copy of your child's birth certificate accompanies this form.

Please print clearly.

| Today's Date | | |
|---|---------------------------------------|-------------------------------------|
| - | | (Last) |
| Gender of Child: M/F | Child's Date of Birth: | |
| Child's City of Birth: | | |
| Child's State of Birth: | Child's Country of Bir | th: |
| Address: | | |
| Is the child's address different than t | he parents? Yes () No () | |
| | | |
| Mother's Full Name: First | (M) | (Last) |
| Mother's Birth Name: | | |
| Daytime Phone (Mother) | Cell (Mother) | |
| Email (Mother) | Me | mber of St. Patrick? Yes () No () |
| Religion of Mother: | Mother (| Confirmed? Yes () No () |
| | | |
| Father's Full Name: (First) | (M) | (Last) |
| Daytime Phone (Father) | Cell (Father) | |
| Email (Father) | Member of St. Patrick? Yes () No () | |
| Religion of Father: | Father Confirmed? Yes () No () | |
| | | |
| Each parent please sign to confirm co | onsent of your child's Baptism: | |
| Father: | | |
| Mother: | | |
| | | |

St. Patrick Parish Godparent/Witness Information

The Catholic Church requires the following of Godparents: (Canon 874.1)

- The Godparents are to be chosen by the parents or guardians.
- They are to be at least sixteen years of age.
- They must be Catholics who have already been confirmed and have received the Holy Eucharist.
- They should be leading a life in harmony with the faith; i.e., practicing Catholics (attending Mass), if married, in a valid Catholic Marriage, etc.
- They may not be the father or mother of the one to be baptized.
- You may choose one or two godparents. If you choose two, one must be male and the other female.
- The godparents must have the qualifications for and intention of carrying out this duty.

Non-Catholic Witness (Can.874.2) A **baptized** person belonging to a non-Catholic ecclesial (church) community may be admitted as a witness to baptism, but only along with a Catholic Godparent. This person is **not** formally called a Godparent, but will be referred to as a Christian Witness

Information about the Godparents

Male Godparent Name: _____ Confirmed Catholic? Yes () No () Member of St. Patrick Parish? Yes () No () If no, where? Female Godparent Name: ______ Confirmed Catholic? Yes () No () Member of St. Patrick Parish? Yes () No () If no, where? Will either godparent be resented by a proxy? Yes () No () Christian Witness Name: ______ **OFFICE USE ONLY** Presiding Priest/Deacon Date of Baptism Preparation Class for Parents _____ Godparents ____ Baptism Instructor _____ Scheduled Date of Baptism _____Time_____ Actual Date of Baptism _____ Copy of Birth Certificate _____ Letter of Approval _____ Date Recorded in Church Registry _____



THE CATHOLIC PARISHES OF WALWORTH COUNTY

Letter of Approval

for Godparents or Sponsors

The Code of Canon Law (c.874) enlists the following requirements for those to be admitted as Godparents or Sponsors for a sacrament:

- Must be a Catholic, with the capacity and intention of performing this mission.
- Must be at least 16 year of age or older.
- Have received the Sacraments of Christian Initiation (Baptism, Eucharist, Confirmation) Lead a life of faith in keeping with the function to be taken on.
- Not be bound by any canonical penalty.
- Must not be the father or mother of the candidate to receive the sacrament.

Please read carefully and answer the following questions:

| 1. I am a Catholic and acknowled Godfather/Godmother. YES NO_ | edge the commitment that I must fulfill as be | eing invited to be a |
|---|--|-----------------------|
| 2. I am at least 16 years of age. Y | | |
| • | ts of Christian Initiation (Baptism, Eucharist, | and Confirmation) |
| YES NO | to of Christian Induction (Baptism, Bacharist, | una Communation.) |
| | ng Catholic example to my Godson/Goddaugh | nter and to opt for a |
| life of faith. YES NO | ing cumono champro to my couson cousings. | opt for w |
| | ried in the Catholic Church. YES NO | |
| I promise under oath, with the help of God and willing to assume my commitment. | d of the Church, that all of the given answers an | re true and that I am |
| Printed Name of Godparent or Sponsor | Signature | Date |
| Name of Godson/Goddaughter: | | |
| Sacrament that Godson/Goddaughter will receive: | : | |
| | | |
| Parish Seal | Signature of pastor or other authorized pastoral min | nister |