Saint Michael the Archangel
100 Oak Drive South, Lake Jackson, TX 77566
Parish phone #: (979) 297-3041
Parish Website: https://smlj.org

Director of Faith Formation
Claudia Sereno *claudia@smlj.org* *979-297-3043*
Administrative Assistant: K-6th
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Administrative Assistant: 7th–12th
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GODPARENT/SPONSOR COVENANT

CANDIDATE: _____
First Name *Middle Name* *Last Name*

As a sponsor, your role is to encourage the faith of your candidate and be an "example" to your candidate and to reflect with the candidate on the meaning of a life of Catholic discipleship.

To perform the role of sponsor, it is necessary that a person fulfill the conditions stated in the Code of Canon Law #874:

1. be designated by the one to be baptized (confirmed), or by the parents or the one who takes their place or, in their absence, by the pastor or minister and is to have the qualifications and intention of performing this role
2. have completed the sixteenth year, unless a different age has been established by the diocesan bishop or it seems to the pastor or minister that an exception is to be made for a just cause
3. be a Catholic who has been confirmed and has already received the sacrament of the Eucharist and leads a life in harmony with the faith and the role to be undertaken [e.g. if married, marriage must be recognized by the Catholic Church as valid]
4. not be bound by any canonical penalty legitimately imposed or declared
5. not be the father or the mother of the one to be baptized (confirmed)

Godparent/Sponsor Information

I have read and understand the requirements to be a catholic godparent/sponsor for my candidate

_____
Name ***Last Name*** ***Signature***

_____
Address *City* *State* *Zip Code*

_____
Cell Phone Number *Home Telephone Number/or alternate number* *email address*

I am active in the Catholic Church, regularly attend Mass on Sunday and strive to live my faith in the following Church _____ (City and State) _____

SACRAMENTAL INFORMATION - *I celebrated the following sacraments:*

BAPTISM _____
Church *City and State*

CONFIRMATION _____
Church *City and State*

HOLY EUCHARIST _____
Church *City and State*

Marital Status *Single_____* *Married in church_____* *Divorced/Separated____* *Widow/er_____*

If married, please provide the following information:

Matrimony_____
Church *City and State* *Date of Marriage*