Diocese of Stockton

(Name a	& Address of Parish)						
	Spor	nsor/God	parent Eli	gibility	Form	_	
For	BAPTISM CONFIRMATION		Of Print full name of person to be baptized/confirmed				
Printed Name of Sponsor/Godparent				Telephone:			
Addres	SS:	City/State:	City/State:Zip:				
been co harmony	nfirmed and have receivent with the faith in keeping	ed the Sacrament of with the function to	Eucharist. They must be undertaken. (<i>Canor</i>	e free from canon	nation must be Catholics who hanical penalty and must lead a life		
	I am at least 16 years	s of age.		and Fugharist			
	I participate in Sund I understand the res	, ,		oth the desire a	nd intention to fulfill it faithfull	y.	
	I participated in the baptismal preparation program at: pa					sh	
	on date. (not required for confirmation sponsors)						
	I am a parishioner of				parish, located	d at	
				siı	nce	·	
	Address, city and state of			Date			
affirm	that I meet all the ne	cessary requirem	nents to act as a spo	onsor/godparen	ıt.		
Signatu	ure of Sponsor/Godpa	arent:			Date:		
NOTE:	Sponsor/godparent ecclesial minister d			rmation by you	ır priest, a deacon, or a lay		
For use L	by the parish of the sponsor.	,					
To the lanother		his person is able	to fulfill the responsib	oilities involved in	n sponsoring the Catholic initi	iation	
Yes		No		Other	(Please comment on reverse s	ide.)	
Signatu	re:						
Parish:							
Date:					——— Church S	Seal	