

St. Vincent de Paul Catholic Church

1502 E Wallen Rd | Ft. Wayne, IN 46825

Phone: 260-489-3537 x3 | Fax: 260-497-9405 | Email: church@saintv.org

Please complete and sign this form. If you are not a registered member of St. Vincent de Paul Church, take this form to your parish to have **the bottom of this form signed and sealed in your parish**. If you are a registered member of St. Vincent de Paul Church, fill out and return to the parish office to have it approved. Return the completed form by mail, scanned to an email, or fax at least two (2) weeks prior to the scheduled Baptism (contact information listed above).

To be permitted to take on the role of sponsor, a person must (a) have completed the sixteenth year of age; (b) be a baptized, practicing Catholic who has received Confirmation and First Holy Communion and, if married, has been married in the Catholic Church; (c) not be the father or mother of the child. Further, there is to be only one male sponsor or one female sponsor or one of each. A baptized person who belongs to a non-Catholic ecclesial community may serve as a witness to the baptism together with a Catholic sponsor.

Baptism Sponsor Certificate for those who are Catholic

I, _____, a registered member of the Roman Catholic parish of

(First Name) (Middle Name) (Last Name)

(City)

(State)

have been asked to be a sponsor for _____ child of _____.

(Name of the person to be baptized)

(Name of parents of person to be baptized)

As a sponsor, I am accepting the responsibility to be a visible representative of the Catholic Community, the Body of Christ. I will assist the parents in raising this child in the Spirit and teaching of the Roman Catholic Church. I intend to encourage this child in the practice of our Catholic Faith by being a role model in the Catholic way of living through my love, example, support, and prayers. I meet the qualifications of a godparent.
(Please check all that apply)

_____ I am at least 16 years of age

_____ I am a Catholic who has received the Sacraments of Baptism, Confirmation, and Eucharist OR made a Profession of Faith in the Catholic Church at _____
on _____ (Date) (Name of Church) (City/State)

_____ I participate in the celebration of Mass regularly on Sundays and on Holy Days of Obligation.

_____ I am not married

_____ I am married, and was married in (or my marriage has been blessed by) the Catholic Church

(City/State)

(Date)

Please state the steps you are currently taking to strengthen your faith life and remain connected to the Catholic Church and the sacraments:

I attest that the information provided above is accurate: _____
(Signature)

(City)

(State)

(Zip)

(Phone number including area code)

(This portion is to be filled out by the parish in which the sponsor is registered.)

I certify that, to the best of my knowledge, this person is capable of assuming the duties and responsibilities of the role of a baptismal sponsor.

(Date)

Church Seal