



CERTIFICATE OF ELIGIBILITY

St. Dennis Catholic Church
1214 S. Hamilton Street
Lockport, IL 60441

CERTIFICATE OF ELIGIBILITY IS REQUESTED FOR: BAPTISM _____ CONFIRMATION _____

WITNESS/SPONSOR FOR: _____
(Name of person being baptized or confirmed)

NAME AND ADDRESS OF PARISH: _____ **ST. DENNIS CHURCH LOCKPORT, IL** _____
(Parish where Baptism or Confirmation to be held)

SCHEDULED DATE OF CEREMONY: _____

GODPARENT OR SPONSOR INFORMATION

I _____ affirm that:
(Please print first and last name)

- I am at least 16 years of age.
- I am a practicing Catholic registered at a parish.
- I have received the sacraments of Baptism, First Holy Communion and Confirmation in the Catholic Church.
- I participate in the Mass on Sundays and Holydays and receive the Sacraments of Eucharist and Reconciliation regularly.
- I regularly support of the church
- I actively strive to live out my commitment to Christ and to the community life of the Church by my loving response to those with whom I come in contact.
- I realize that I assume a great responsibility before God and the Church in becoming a sponsor and will faithfully fulfill the obligations connected with it. I will give support to the person I am sponsoring by my prayers and by the Christian example of my daily life.

By my signature, I attest to be a practicing Catholic who seeks to be admitted as a sponsor, solemnly affirm that I fulfill the requirements of the Catholic Church for this role as presented above. I intend, with the grace of God, to continue the practice of my Catholic Faith, and I will, to the best of my ability, carry out the obligations of my role as godparent or sponsor.

(Sponsor's Signature)

(Date)

TO BE COMPLETED BY THE SPONSOR'S PARISH

This is to certify that _____

_____ is a registered member of _____

_____ is in good standing in this parish and that he/she meets the requirements for being a sponsor.

_____ is registered in our parish as an active, practicing Catholic.

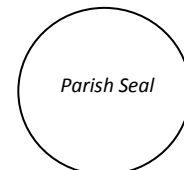
Priest Signature _____

Date: _____

Church of _____

Address _____

Phone # _____



Parish Seal