

St. Vincent de Paul Catholic Church

680 W. Memorial Drive, Dallas, GA 30132 – 770-443-0566

Certificate of Sponsorship for Baptism ____ or ____ Confirmation

I acknowledge that to serve as a sponsor I must meet the following criteria:

I am a Catholic who has been confirmed. Yes____ No____

I am at least sixteen years of age. (An exception may be made by the Pastor for just cause.) Yes____ No____

I will undertake the ministry of a sponsor and promise to lead a life of faith in harmony with that ministry. Yes____ No____

I affirm that I am not the parent of the child to be baptized or confirmed. Yes____ No____

I am married. Yes____ No____

If yes, were you married in the Catholic church by a Catholic priest or deacon? Yes____ No____

I join in the celebration of Holy Mass and receive Communion regularly and fulfill my obligations to my parish. Yes____ No____

I am a registered member of St. Vincent de Paul Catholic Church in Dallas, GA. Yes____ No____

If No: I am a registered member of _____
Catholic Church in (city/state)_____.

I recognize that sponsors have a special ministry in the sacraments of Baptism and Confirmation. I understand my responsibility to lead a Christian life and fulfill the obligations flowing from it. I hereby testify that I fulfill all these requirements to serve as a sponsor.

Signature: _____ Date: _____

Printed name: _____ Telephone #: _____

Address: _____ City: _____ State: _____ Zip code: _____

Name of candidate for Baptism or Confirmation: _____ Date of Baptism/Confirmation: _____

Name of church where the Baptism/Confirmation will take place: _____

I, the sponsor, request that the certificate be mailed to the attention of: _____

Address: _____ City: _____ State: _____ Zipcode: _____

Or sent via facsimile to (Area code plus telephone number): (____) _____

Or I will pick it up in the parish office. Please call me at (____) _____ to let me know when it is ready.

If you are not a registered member of St. Vincent de Paul please have the box below completed by your parish.

Office Use:

I hereby testify that _____ is a registered member of this parish and has affirmed that he/she fulfills all of the requirements to serve as a sponsor.

Signature of Parish Priest/Deacon Date _____

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