



ST. JOSEPH'S CATHOLIC CHURCH

To Evangelize God's People beginning with the Gift of the Holy Eucharist

1813 Oakdale Rd. Modesto CA 95355 | 209-551-4973

Godparent / Sponsor Application

Full Name of Person to be Sponsored: _____

Date of Birth: ____/____/____ Address: _____

Sponsor Name: _____

Phone: _____ Email: _____

I understand that as a godparent or sponsor I am to live a life in accord with the theological and moral teachings of the Catholic Church and that this is a lifetime commitment to serve as a faithful witness of the Catholic way of life to the individual I am called to sponsor. I attend Mass on Sundays and all holy days of obligation, receive Reconciliation and the Eucharist regularly. I live by the Church's moral teachings regarding sexual purity (e.g., I am not sexually active outside of marriage, in an irregular marriage, or an active homosexual). I attest that I have received the sacrament of Confirmation and that I am at least 16 years old and have no impediments for serving as a godparent or sponsor. I will attend sponsor preparation sessions to the best of my ability. *I affirm that I meet all the necessary requirements to act as a sponsor:*

Signature of Sponsor: _____ Date: _____

Parish Name: _____

Parish Address: _____

SPONSOR: Please submit this form to the parish where you are registered for affirmation and sealing.

*Be prepared to submit copies of all sacrament certificates (Baptism, Communion, Confirmation, Matrimony if married).

TO BE FILLED OUT BY THE PARISH OF THE SPONSOR:

I affirm that this person is qualified to fulfill the responsibilities of a Catholic Godparent / Sponsor.

Yes No Other (explain) _____

Signature: _____

Date: ____/____/____

PARISH SEAL:

