GUARDIAN ANGEL CATHEDRAL LAS VEGAS, NEVADA

Requirements for the Role of Godparent / Christian Witness(If two Catholic godparents are chosen, one of these sheets is required for each godparent.)

Name of child to be baptized (print):	
Name of godparent/Christian Witness (print):	Religion
	ny of baptism, but also assist the baptized in leading a Christian life. Therefore, living the Catholic faith and meet the following qualifications (Canons 872-874):
	ionship to the person who is to be baptized. A godparent serves as a model ving, as that person is renewed and strengthened by the power of the Holy
WITH THAT UNDERSTANDING, I recogni <i>Each)</i>	ze that in order to serve as a godparent, <u>I attest that:</u> (<i>Please Initial</i>
I am at least 16 years of age.	
currently living a sacramental l	has been Baptized, received the Eucharist and been Confirmed, and who is life (e.g., attending Mass regularly, making the use of the Sacrament of rregular marriage, or living a life of habitual sin.
	nd Mass on Sundays and Holy Days of Obligation at my home parish of in
	in(City/State/County)
	iage is a valid Catholic marriage. I was married in
(City/State/County)	at(Name of Parish)
I am not cohabitating, which is li	iving together without marriage.
I am not a parent of the child to b	pe Baptized.
I have attended the Baptism prep	paration class offered at
	(Name of Parish)
	the parents of the child in their duty as Christian parents, especially by my Catholic faith thereby helping the child lead a Christian life.
I hereby declare that I am a registered member to serve in the ministry of godparent/sponsor for	of the Catholic parish named above and that I fulfill the requirements r baptism.
Signature of Godparent:	Date:
☐ I am a registered member of :	
	is a registered member of our parish, is a practicing Catholic, nt.
Signature of pastor/delegate:	Date:
Parish Name:	Parish Seal
City: State:	
(MUST SEND ORIGINAL COPY OF THIS FORM – N	NO FAX or EMAIL COPIES PLEASE)