

ARCHDIOCESE OF NEW ORLEANS

Parental Testimonial for the Sacrament of Baptism

Date: _____

Name of Child to be Baptized: _____

Proposed Date of Baptism _____

Statement of Catholic Parent(s)

“It is my sincere hope and intention to raise my child in the Catholic faith and to do all in my power to assure through my own efforts that my child practices and grows in the Catholic faith.”

By signing below, the Catholic parent(s) solemnly swear that the statement above is a true and correct indication of their intentions.

(Must be signed by at least one Catholic parent.)

Father's Signature: _____

Father's Name Printed: _____

Mother's Signature: _____

Mother's Name Printed: _____

Signature of Pastor or Delegate (In Parish where Baptism is to be Celebrated)

ARCHDIOCESE OF NEW ORLEANS

Godparent Testimonial for the Sacrament of Baptism

Date: _____

Name of Child to be Baptized: _____

Proposed Date of Baptism _____

Criteria to Serve as Godparent for Baptism

1. The Godparent must be a Catholic in good standing with the Church who has been Confirmed and regularly practices his/her Catholic faith;
2. The Godparent must be at least sixteen years of age;
3. If married, the Godparent must be in a marriage recognized as valid by the Catholic Church. Person may not be cohabiting, or living together without marriage.
4. If not previously attended, the Godparent will attend a Baptismal Seminar in preparation for this Baptism.

Statement of Godparent

“I meet the above stated criteria to serve as a Godparent, and I will do all in my power to assist the parents of this child to raise their child in the Catholic faith.”

By signing below, the proposed Godparent solemnly swears that he or she has read the above criteria, and that the statement above is a true and correct indication of his/her intentions.

Godparent's Signature: _____

Godparent's Name Printed: _____

Signature of Pastor or Delegate (In Parish where Baptism is to be Celebrated)

If the godparent will be absent from the baptism:

I cannot attend the baptism and so I name _____ to act as my proxy.

(Godparent's signature)

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Godparent Testimonial for the Sacrament of Baptism

Date: _____

Name of Child to be Baptized: _____

Proposed Date of Baptism _____

Criteria to Serve as Godparent for Baptism

1. The Godparent must be a Catholic in good standing with the Church who has been Confirmed and regularly practices his/her Catholic faith;
2. The Godparent must be at least sixteen years of age;
3. If married, the Godparent must be in a marriage recognized as valid by the Catholic Church. Person may not be cohabiting, or living together without marriage.
4. If not previously attended, the Godparent will attend a Baptismal Seminar in preparation for this Baptism.

Statement of Godparent

“I meet the above stated criteria to serve as a Godparent, and I will do all in my power to assist the parents of this child to raise their child in the Catholic faith.”

By signing below, the proposed Godparent solemnly swears that he or she has read the above criteria, and that the statement above is a true and correct indication of his/her intentions.

Godparent's Signature: _____

Godparent's Name Printed: _____

Signature of Pastor or Delegate (In Parish where Baptism is to be Celebrated)

If godparent will be absent from the baptism:

I cannot attend the baptism and so I name _____ to act as my proxy.

(Godparent's signature)