



## **HOLY GHOST CATHOLIC CHURCH**

601 North Oak Street • Hammond, Louisiana 70401 • 985.345.3360

### **SPONSOR ELIGIBILITY FORM**

FOR:  Baptism       Confirmation       R.C.I.A.

*Please PRINT all information on this top portion of the document. The sponsor's signature is required at the appropriate place. The sponsor must have this document signed by a priest in the parish where he/she is registered and attends Sunday Eucharist regularly. Return this form to Holy Ghost Church by mail, email to [tlabbe@hgchurch.org](mailto:tlabbe@hgchurch.org) or in person **at least ONE month prior to the baptism.***

Name of Sponsor: \_\_\_\_\_

Address of Sponsor: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

#### **NAME & ADDRESS OF CATHOLIC CHURCH WHERE THE SPONSOR IS REGISTERED:**

\_\_\_\_\_

CHURCH NAME	ADDRESS	CITY	STATE	ZIP CODE
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As a sponsor for \_\_\_\_\_, I declare that I am at least 16 years of age, and I am a baptized Catholic who has completed my initiation in the Catholic Church through the Sacrament of Confirmation. I am a registered, active and supporting member of the Catholic Parish stated above.

*(If applicable)* I am in a valid marriage recognized by the Catholic Church.

I believe what the Catholic Church teaches and I make a serious effort to live my life according to the Gospel and worthy of imitation by the person I am sponsoring. I realize the great honor and responsibility placed on me before God and the Church in serving as a sponsor. I intend to encourage and support the person I am sponsoring in the practice of the Catholic faith by my word and example.

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date

**\*\*\*THIS SECTION TO BE COMPLETED BY THE PRIEST WHERE THE SPONSOR IS REGISTERED\*\*\***

*Please affix the parish seal on this document and include any additional remarks on the back of the page if necessary.*

This is to certify that \_\_\_\_\_

\_\_\_\_\_ is in good standing in this parish and that s/he meets the requirements for being a godparent.

\_\_\_\_\_ is registered in our parish as a practicing Catholic.

Signature of Catholic Priest: \_\_\_\_\_

Church Parish: \_\_\_\_\_

Date: \_\_\_\_\_

Affix parish  
seal here.