

SACRAMENTAL SPONSOR QUALIFICATION FORM

Holy Cross Catholic Church
631 S. State Street
Dover, DE 19901 Phone (302)674-5787

_____ Baptism
_____ Confirmation
_____ RCIA

Name of person to be Baptized or Confirmed: _____

Full Name of Godparent/Sponsor: _____

Address: _____

Telephone: (_____) _____

Parish in which Godparent/Sponsor is registered: _____

Statement of Godparent/Sponsor:

“I am a practicing Roman Catholic at least sixteen years of age who participates in the Mass on a regular basis. I have been baptized, and I have received the Sacraments of Confirmation and Eucharist. If married, my marriage has been blessed by the Catholic Church.

I understand and accept the responsibility which I am undertaking as a Godparent/Sponsor. I promise to help the above named candidate in her/his spiritual formation as a Catholic Christian through prayer, support and personal example.

All this is promise to do with the help of God’s grace.”

Date

Signature of Godparent/Sponsor

ENDORSEMENT OF SPONSOR’S PARISH

_____ is a practicing Catholic in good standing in our
(Godparent/Sponsor’s Name)
parish and meets the requirements to serve as a sacramental sponsor for Baptism
and/or Confirmation.

Date

_____ (SEAL)
Signature of Priest/Deacon or other
Authorized Parish Official

Return to Holy Cross Church: ATTN – Youth Ministry