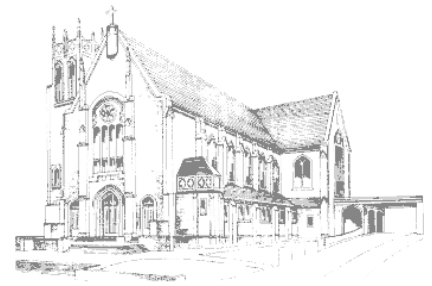


CATHEDRAL OF ST. JOHN BERCHMANS  
 939 JORDAN STREET, SHREVEPORT, LA 71101  
 PHONE: 318-221-5296 FAX: 318-221-8076



**BAPTISM SPONSORSHIP CERTIFICATION**

Sacramental Details:

Name of child (please print): \_\_\_\_\_  
 Church of Baptism: \_\_\_\_\_  
 City/State of Baptism: \_\_\_\_\_  
 Anticipated date of Baptism: \_\_\_\_\_

**SECTION ONE** (to be completed by the Godparent/Sponsor):

I acknowledge (or truthfully state before God) that to serve as a Godparent/Sponsor I am meeting the following criteria as set forth by the Church's Code of Canon Law cann. 874)

- I am a Catholic who has been confirmed and received the most holy Sacrament of the Eucharist.  Yes  No
- I am at least sixteen years of age.  Yes  No
- I affirm that I am not the parent of the child to be baptized.  Yes  No
- I regularly attend Mass and live a life of faith in keeping with the role of a Godparent/sponsor.  Yes  No
- I am married in the Catholic Church and in good standing under Canon Law and not in an irregular marriage (an irregular marriage is any marriage not performed/blessed by a Catholic priest or deacon).  Yes  No  
 I am single.
- I am a registered parishioner of the Cathedral of St. John Berchmans.  Yes  No
- I am a registered parishioner of \_\_\_\_\_ Catholic Church, in \_\_\_\_\_, \_\_\_\_\_.  Yes  No  
Name of Church City State

I recognize that Godparents/Sponsors have a special responsibility in the sacraments of Baptism and Confirmation, to lead a Christian life and fulfill the obligations flowing from it as I help this child lead a Christian life in keeping with Baptism. I hereby testify that I fulfill all these requirements to serve as a Godparent/Sponsor.

Name (please print): \_\_\_\_\_  
first middle maiden last suffix

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**SECTION TWO** (to be completed by Parish Priest):

I hereby testify that \_\_\_\_\_ is a registered member of this parish and has affirmed that he / she fulfills all of the requirements to serve as a sponsor.

\_\_\_\_\_  
 Signature of Parish Priest Date Phone Number



St. John's Church Office Use:  Current baptism certificate with notations  \_\_\_\_\_  
 Baptism Seminar at St. John's – date \_\_\_\_\_  Non-SJB Baptism Seminar Certificate – date \_\_\_\_\_