

BAPTISM GODPARENT LETTER OF REFERENCE

The purpose of this letter of reference is to qualify the Godparent below for an upcoming Baptism at St. Charles Catholic Parish. Each Godparent fills out a separate form completing Section #1 and their Catholic Parish or Christian Church completes the Section #2. Upon completion, the Catholic or Christian Parish is requested to promptly mail this original form with the pastor's signature and <u>raised parish seal</u> to:

St. Charles Parish ATTN: Baptism Coordinator 313 Circle Drive Hartland, WI 53029

Section #1: The Godparent-to-be completes this section.

Instructions: Please include the <u>full</u> names, check option, and sign and date.

Full Name of Godparent (Sponsor or Chris Witness)		
Full Name of Child to be Baptized:		
✓Please check Option #1 or Option #2 that be	est applies to your Godparent qualificati	ons below:
 I have received the three sade I am over 16 years of age. I will give support to the chin assisting the parents of this Option #2: For Christian Witness/God I affirm that I am an active an I will give support to the chin 	and registered parishioner of the Cathol craments of initiation: Baptism, Euchardid being baptized by helping him/her less child in their duty as Christian parents larent: and registered parishioner of the Christial being baptized by helping him/her less child in their duty as Christian parents	ist & Confirmation. ead a Christian life and by s. ian Church below. ead a Christian life and by
Signature of Godparent	Date	
Section #2: The Godparent's Catholic Paris The above person listed as a Sponsor/God actively participating member of:	•	
Name of Parish/Church	City, State & Zip	
I (the Pastor) affirm that the above person congregation.	listed as Godparent is a practicing n	aember of my
Signature of Pastor	Date	Parish Seal