



# Certificate of Eligibility

Holy Spirit Catholic Community  
2003 Hassert Blvd.  
Naperville, IL 60564  
630-922-0081

GODPARENT FOR: \_\_\_\_\_  
(Name of person being baptized)

## GODPARENT INFORMATION

I \_\_\_\_\_  
(please print first and last name)

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

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

*Initial each statement and sign below.*

\_\_\_\_\_ I am at least 16 years of age. I am a practicing Catholic and I have received the sacraments of Baptism, First Holy Communion and Confirmation in the Catholic Church.

Name and City/State of parish where I was confirmed :  
\_\_\_\_\_

Confirmation Date \_\_\_\_\_ *(Please submit a copy of Confirmation Certificate.)*

\_\_\_\_\_ I participate in the Mass on Sundays and Holy Days and receive the Sacraments of Eucharist and Reconciliation regularly.

\_\_\_\_\_ I actively strive to live out my commitment to Christ and to the community life of the Church by my loving response to those with whom I come in contact.

\_\_\_\_\_ I realize that I assume a great responsibility before God and the Church in becoming a Godparent and will faithfully fulfill the obligations connected with it. I will give support to the person I am sponsoring by my prayers and by the Christian example of my daily life.

By my signature I attest to the truth of these statements \_\_\_\_\_  
Sponsor Signature

### **MUST BE COMPLETED AND STAMPED WITH SEAL BY THE SPONSOR'S CURRENT PARISH**

Priest Signature \_\_\_\_\_  
(must be signed by a Roman Catholic Priest at your current parish)

CHURCH NAME \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

DATE \_\_\_\_\_

