

## GODPARENT COMMITMENT FORM FOR BAPTISMS AT

Visit our website for  
resources that can help you:  
[www.ourladyoflight.com/baptism/](http://www.ourladyoflight.com/baptism/)

Our Lady of Light Catholic Community  
19680 Cypress View Dr, Ft Myers, FL 33967  
Phone: (239) 267-7088, x242  
Email: [FaithFormation@ourladyoflight.com](mailto:FaithFormation@ourladyoflight.com)

Congratulations, you have been asked to be part of a Catholic Baptism at OLOL!

CCC Canon 874: To be admitted to the role of **Catholic Godparent**, a person must be a Catholic who has been confirmed and has already received the Sacrament of the Most Holy Eucharist and leads a life in harmony with the faith and the role to be undertaken, including if married, marriage in the Church.

Please complete and check appropriate boxes, then ask your Catholic Parish to sign and seal, then return it to us. Completed Godparent form(s) should be in the office at least 4 weeks prior to the anticipated Baptism date.

I, (print your name) \_\_\_\_\_ a practicing **Catholic** seeking to serve as a Godparent or sponsor for (print the candidate's name) \_\_\_\_\_, affirm that I fulfill the requirements of the Catholic Church for this role as presented below. I intend, with the grace of God, to continue the practice of my Catholic faith, and I will, to the best of my ability, carry out the obligations of my role as sponsor/godparent, living as a witness to the love and grace of Jesus Christ.

**These are the requirements of a Godparent, please check the boxes:**

- I promise to actively practice in the Catholic Faith
- I am at least 16 years of age
- I have received the Sacraments of First Eucharist and Confirmation
- If single, I am not cohabiting
- If married, I am married in the Catholic Church
- I promise to participate in weekly Sunday Mass and regularly take communion
- I promise to give good Christian witness and pray for the child I am sponsoring

### YOUR INFORMATION

Godparent printed name \_\_\_\_\_

Godparent signature \_\_\_\_\_ Today's Date \_\_\_\_\_

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

Mailing Address \_\_\_\_\_

### YOUR HOME CATHOLIC PARISH

Parish Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Attested by Rev. \_\_\_\_\_ Date \_\_\_\_\_

**Seal**