

**St. John Chrysostom Church  
617 S. Providence Road, Wallingford, PA 19086**

**APPROVAL FOR SACRAMENTAL SPONSORSHIP**

**SACRAMENT (S)** \_\_\_\_\_

**NAME OF CANDIDATE** \_\_\_\_\_

**NAME OF GODPARENT/SPONSOR** \_\_\_\_\_

**STATEMENT OF GODPARENT/SPONSOR**

I, \_\_\_\_\_, understand that in accepting the role of sacramental sponsor, I am prepared to be a model and an example as a committed and active Catholic and to be a support to his/her parents in the practice of our mutual faith.

I attest that I am committed to my Catholic faith, that I am baptized and confirmed in it; that I am at least sixteen years of age, that I am not the father or mother of the candidate; that I am not married outside the Church or otherwise compromised in my own sacramental life, and that I meet my fundamental obligations as a Catholic by regularly participating in Sunday Mass and Holy days, by receiving the Eucharist as often as possible and the Sacrament of Reconciliation as necessary, by being open to the work of God as revealed in Scripture and taught by the Church, by witnessing to the values of the Gospel of Jesus Christ, and by seeking to be of service to others for love of Him.

\_\_\_\_\_  
Sponsor Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

**STATEMENT OF PRIEST**

This will verify that the above named person is a registered member of this parish and is, to the best of my knowledge, initiated in the sacraments of the Church, is in good standing with the Church, is faithful in attending Sunday Mass and in the practice of the Catholic Faith, and is worthy to accept the responsibility of a sacramental sponsorship.

\_\_\_\_\_  
Pastor/Parochial Vicar