

Godfather Form

St. Gabriel the Archangel, McKinney, Texas

Date of the Baptism: _____

Dawn Purcell, Sacramental Coordinator
dpurcell@stgabriel.org 972-542-7170 ext. 227

(To be completed and signed by the Godfather)

Name of the Child:		
Name of the Godfather:		
Address of the Godfather:		
City:	State:	Zip Code:
Cell phone:	Email:	

1. Is the Godfather a Catholic or a Christian Witness?

Catholic? _____ Or Christian Witness? _____ (Do not complete past this point if a CW)

2. Have you received the Sacraments of Initiation:

- Baptism Yes No
- Eucharist Yes No
- Confirmation Yes No

3. Godfather, are you older than 16 years old? Yes No

4. Are you a practicing Catholic (attends Mass)? Yes No

5. Godfather's Civil Status:

Single Married Divorced Widow

6. If you are married, were you married in the Roman Catholic Church? Yes No N/A

I, _____, take this commitment serious. By signing this form, I totally agree and understand clearly the pledge and the importance of my participation in the life and development of faith of my Godchild.

Signature of Godfather

Date