

## Sponsor/Godparent Information

Name of godmother: \_\_\_\_\_

Telephone/Email Address: \_\_\_\_\_

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

*Please answer the following questions truthfully and in good conscience:*

**1. Have you received the Sacrament of Confirmation? Yes\_\_\_ No\_\_\_**

If yes, name of church/town: \_\_\_\_\_

If no, are you willing to participate in a program leading to reception of Confirmation? Yes\_\_\_ No\_\_\_

**2. Are you married? Yes\_\_\_ No\_\_\_**

If yes, please circle one: Catholic Church      Other Church      JP

If you are not married in the Catholic Church, are you willing to start a process to receive the Sacrament of Marriage? Yes\_\_\_ No\_\_\_

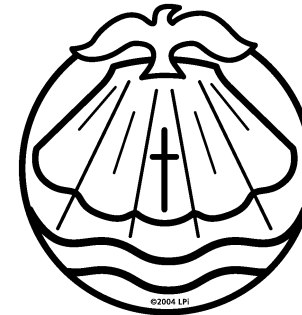
**3. Are you prepared to share your faith by word and deed with your godchild by attending Sunday Mass and receiving the sacraments?**

Yes\_\_\_ No\_\_\_

\_\_\_\_\_  
Signature of sponsor

\_\_\_\_\_  
Date

# BAPTISM INFORMATION FOR FAMILIES AND GODPARENTS



**PLEASE RETURN TO  
Catholic Parishes of Methuen  
254 Merrimack St.  
Methuen, MA 01844**

**(978) 686-3311  
faithformation.stlm@gmail.com**

## FAMILY INFORMATION

Name of child: \_\_\_\_\_  
*first/middle/last*

Date of birth: \_\_\_\_\_

City/state of birth: \_\_\_\_\_

Emergency baptism in hospital? Yes \_\_\_\_\_ No \_\_\_\_\_

Name of father: \_\_\_\_\_  
*first/middle/last*

Name of mother: \_\_\_\_\_  
*first/middle/last include maiden name:*

Father's religion \_\_\_\_\_ Mother's religion \_\_\_\_\_

Are you married? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, circle: Catholic Church Other church JP

If you are not married in the Catholic Church, are you interested to start a process to receive the Sacrament of Marriage? Yes \_\_\_\_\_ No \_\_\_\_\_

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

City/state/zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Godfather:** \_\_\_\_\_

Telephone or e-mail: \_\_\_\_\_

**Godmother:** \_\_\_\_\_

Telephone or e-mail: \_\_\_\_\_

Preferred Date of Baptism: \_\_\_\_\_

## Sponsor/Godparent Information

Name of godfather: \_\_\_\_\_

Telephone/Email Address: \_\_\_\_\_

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

*Please answer the following questions truthfully and in good conscience:*

**1. Have you received the Sacrament of Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_**

If yes, name of church/town: \_\_\_\_\_

If no, are you willing to participate in a program leading to reception of Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_

**2. Are you married? Yes \_\_\_\_\_ No \_\_\_\_\_**

If yes, please circle one: Catholic Church Other Church JP

If you are not married in the Catholic Church, are you willing to start a process to receive the Sacrament of Marriage? Yes \_\_\_\_\_ No \_\_\_\_\_

**3. Are you prepared to share your faith by word and deed with your godchild by attending Sunday Mass and receiving the sacraments?**

**Yes \_\_\_\_\_ No \_\_\_\_\_**

\_\_\_\_\_

Signature of sponsor

Date

***OVER FOR 2<sup>ND</sup> SPONSOR***