

## St Michael Catholic Church GODMOTHER APPLICATION

Internal Use Only	
Attended Baptism Class:	-

SEAL

Child's First Name		Child's Middle Name	Child's Last Name		
Godmother's First Name		Godmother's Middle Name	Godmother's Last Name		
Home Phone		Cell Phone	Are you a member of St Michael Parish? ☐ Yes ☐ No (See below)		
	other Qualifications dance with Canon Law 874, a Goo	dparent must meet all the following require	ements:		
	Be fully initiated into the Catholic 0 Have you received these Sacramo Baptism: ☐ Yes ☐ No Confirm		es □No		
2.	Be at least 16 years old. Date of birth				
	Not a parent of the child to be baptized.  Are you this child's parent? □ Yes □ No				
	Be in good standing with the Catholic Church. This means that you attend Mass on Sundays and holy days of obligation and you regularly receive the sacraments of Holy Communion and Reconciliation. If you are married, you were married in the Catholic Church and living in accordance with Church teaching.				
	□I am not married.	Name of Churchther Christian church without special pern			
5.	. Complete the Baptism Class, held on the second Saturday of the month. Contact St Michael Church Office at 925-447-1585 to register for the class.				
Affirma I affirm t		equirements and commit to the responsibi	lity of a Godmother.		
Godmot	her Signature		Date		
	ed form to your parish and have it	Michael Catholic Parish living in Livermo signed and stamped with the parish seal.			
Name o	f Catholic Parish	CityState			
Pastor's	Signature	Date	PARISH		