



Our Lady of Perpetual Help Catholic Church
8151 Poplar Avenue
Germantown, TN. 38138-6138
(901) 754-1204

Godparent's Information Sheet

Your Infant's Full Name:

Today's date:_____

(First Name)

(Middle Name)

(Last Name)

Please have each godparent complete this form and sign it where indicated. Have their parish priest or minister complete the information at the bottom of this form. Return this completed form to Our Lady of Perpetual Help at least one week prior to your Infant's scheduled baptism.

Godparent's Full Name:

(First Name)

(Middle Name)

(Last Name)

PLEASE NOTE: Do not submit nicknames or abbreviated names. For sacramental record purposes, we are required to enter proper, full names in the baptismal records.

Godparent's Religion: _____

Godparent's Parish & _____

Residence Address: _____

Please indicate below which of the two statements corresponds to your personal faith circumstance:

___ I am a practicing Catholic who has received the sacraments of Baptism, Confirmation and Eucharist. I promise to share my faith with my godchild to the best of my ability, by good example, by practicing my Catholic faith and by loving God and my neighbor.

I am a practicing _____ who has received the sacrament of baptism.
 (Denomination/Faith Tradition)

To the best of my ability I will share my Christian faith with my godchild by being actively Involved in my own church, by my good example and by loving God and *my* neighbor.

Godparent's Signature

This section must be completed by the godparent's priest or minister:

The above named individual is a registered and practicing member of:

 (Please list the name, address, city, state, zip code and telephone number with area code of the church or congregation)

This person is__ _ confirmed.

This person is not_ _ confirmed.

 (Signature of Priest or Minister)

 (Date)

 (Your title)