

Sacred Heart Roman Catholic Church 1307 – 14th Street SW. Calgary, Alberta T3C 1C6 Telephone: 403-244-2741 Fax 403-244-1446

Email: secretaries@sacredheartcalgary.ca

Priest's/Deacon's Letter of Permission/Reference

Baptism Information

Child's Full Name:	
Father's Full Name:	
Mother's Full Name:	
Date of Baptism:	
Parish of Baptism:	
To be completed by Priest or Deacon	
Godparent Information Before choosing your Godparents, please refer to "Guidelines for Godparents" docume Please contact the Pastor at the Church where you are register at, to fill out this form This form must have Pastor's signature and parish seal.	
Godparent/Christian Witness Full Name:	
Registered in the Parish of:	
Male Catholic Godparent Is at least 16 years of age Catholic who has been confirmed and received Holy Eucharist Attends Mass and receives the Eucharist on a regular basis Leads a life of faith in keeping with the role to be taken as Godparent Married? Spouse's full name	Y / N Y / N Y / N Y / N Y / N
If married, please indicate the church of marriage	
Female Catholic Godparent Is at least 16 years of age Catholic who has been confirmed and received Holy Eucharist Attends Mass and receives the Eucharist on a regular basis Leads a life of faith in keeping with the role to be taken as Godparent Married? Spouse's full name	Y/N Y/N Y/N Y/N Y/N
If married, please indicate the church of marriage	
Christian Witness Is at least 16 years of age Is baptized in Trinitarian formula (Father, Son and Holy Spirit) Leads a life of faith and prayer, keeping with the role to be taken as Godparent Married? Spouse's full name	Y/N Y/N Y/N Y/N
If married, please indicate the church of marriage	
I attest that this individual: Fulfills the canonical requirements to be a Godparent/ Christian Witness for the Baptism	Y/N
Pastor's/Associate Pastor's Full Name (Print) Pastor's/Associate Pastor's Sign	ature
Date and Parish Seal	