



Our Lady of the Rosary
ROMAN CATHOLIC CHURCH

14819 South Paramount Boulevard Paramount, CA 90723

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INFORMATION ABOUT THE PERSON RECEIVING SACRAMENT

INFORMACIÓN DE PERSONA RECIBIENDO EL SACRAMENTO

Full Name of Candidate/Nombre del Candidato _____

For/Para ☐ Baptism/Bautismo ☐ Primera Comunión/First Communion ☐ Confirmation/Confirmación

Date of Sacrament/Fecha del Sacramento: _____

From the Code of Canon Law: A Sponsor for the Sacrament of Baptism or Confirmation must be a Catholic who has received the Sacraments of Baptism, Eucharist, and Confirmation. They must be free from canonical penalty and must lead a life in harmony with the faith in keeping with the function to be undertaken. (Canons # 874 & 893)

INFORMATION ABOUT THE SPONSOR/INFORMACION DEL PADRINO

Full Name of Sponsor/Nombre del Padrino(a) _____

Address/Dirección _____

Phone/Telefono _____ Email/Correo _____

In accord with Canon 874 of the Code of Canon Law, the prospective sponsor must meet the following qualifications.

Please read and initial the following affirmations if they are true/Lea y ponga sus iniciales en las siguientes afirmaciones si son verdaderas

☐ I am at least 18 years of age, and I am not the parent of the person receiving the sacrament/
Tengo al menos 18 años y no soy el padre de la persona que recibe el sacramento.

☐ I have received all three sacraments of initiation:/ He recibido los tres sacramentos de iniciación:
☐ Baptism/Bautismo ☐ Eucharist/Comunion ☐ Confirmation/Confirmación

☐ I participate in Sunday Mass regularly/ Participo en la misa dominical con regularidad.

☐ My marriage was witnessed in the Catholic Church by a priest or deacon/Mi matrimonio fue presenciado
en la Iglesia Católica por un sacerdote o diácono OR ☐ I am not married/No estoy Casado(a)

☐ I am a parishioner of (name of church)/ Soy feligrés de (nombre de la iglesia) _____

☐ I affirm that I meet all the necessary requirements to act as a sponsor/godparent as presented above. I
intend to continue the practice of my Catholic Faith, and will, to the best of my ability, carry out the
obligations of my role as sponsor/godparent/ Afirmo que cumplo con todos los requisitos necesarios para
ser padrino/madrina como se presentó anteriormente. Tengo la intención de continuar la práctica de mi
fe católica y, lo mejor que pueda, cumpliré con las obligaciones como padrino/madrina.

Signature of Sponsor/Firma del Padrino/Madrina

Date/Fecha

CERTIFICATION OF SPONSOR'S PARISH

-please request certification by your parish representative at your parish office-

To the best of my knowledge, this person is qualified to act as sponsor for the sacrament selected above.

Name of Church, City and State

Phone Number

Printed Name of Parish Representative

Signature of Parish Representative

Church
Seal