



St. Gabriel the Archangel
FAMILY OF PARISHES

STATEMENT OF THE SPONSOR / GODPARENT

Our Lady of the Rosary
St. Peter St. John the Baptist
St. Christopher Holy Cross
(circle church of sacrament)

St. Gabriel the Archangel Family of Parishes Administrative Address
6161 Chambersburg Rd
Huber Heights, OH 45424
Church Admin: 937-233-1503 Religious Formation 937-237-3516
www.sgfp.org jblaul@sgfp.org

The Catholic Church requires that those who take on the privileges, and the obligations of sponsor / godparents, practice their Catholic Faith faithfully and live lives that set them apart as followers of Jesus Christ. Therefore, a letter of recommendation can be issued to persons who are in the following categories:

(Check the box next to the statements you can affirm)

I affirm that I am:

- ☐ Sixteen years of age or older.
- ☐ Not the parent (step parent, father or mother).
- ☐ A person not bound by any Catholic Church penalty such as divorced and remarried without annulment.
- ☐ A practicing Catholic who attends Sunday mass.
- ☐ A Catholic who has received the Sacraments of Confirmation and Eucharist.

We ask you to honestly and prayerfully sign below if this statement is the truth.

I testify, on my word of honor, that I am registered as a parishioner at _____ Catholic Church. I attend mass regularly. I contribute to and I fulfill the requirements listed above. I accept the responsibility, which I undertake as a sponsor. I promise to be a support and example in the life of _____. I will make every effort to live a Catholic life that reflects the spirit and teaching of the Catholic Church, and I am prepared to assist the parents in their Christian duty by my support, encouragement, and prayer.

Name: _____
(please print) (signature)

Address: _____

**The following is the responsibility of the sponsor to obtain the signature
of their parish priest and seal of their parish.**

TO WHOM IT MAY CONCERN:

We are pleased to be able to issue this testimonial letter of practical Catholicity. The individual whose name is signed above is registered in this parish, is a Catholic of faith, and receives the Sacraments according to the laws of the Church. This person, consequently, qualifies, to the best of our knowledge as a proper sponsor/godparent for any Catholic receiving a Sacrament.

Pastor/Pastoral Associate: _____
(please print) (signature)

Date: _____

PARISH SEAL

9/25