



VERIFICATION FORM FOR GODPARENT  
PARISHIONERS OF ST. PETER CHANEL

I, \_\_\_\_\_, A REGISTERED PARISHIONER OF  
ST. PETER CHANEL PARISH, ROSWELL, GEORGIA, HAVE BEEN ASKED TO BE A GODPARENT FOR  
\_\_\_\_\_ WHO IS TO RECEIVE THE SACRAMENT OF BAPTISM ON  
\_\_\_\_\_ AT ST. PETER CHANEL CATHOLIC CHURCH.

I AFFIRM THAT:

- \_\_\_ I have been confirmed in the Catholic Church.
- \_\_\_ I am 16 years old or older and am not the mother or father of the person to be baptized.
- \_\_\_ I participate in Mass on Sundays & Holy Days of Obligation. I am in full communion with the Catholic Church.
- \_\_\_ I practice my faith in the workplace, in my home and in civic life.
- \_\_\_ I support my parish with my time, talents, and treasure.
- \_\_\_ My marriage is recognized by the Roman Catholic Church, or I am not married.
- \_\_\_ I will actively support the above person with my continuing prayers, encouragement, and the example of my daily Christian life.

\_\_\_\_\_ Date \_\_\_\_\_ Signature

CERTIFICATION BY THE PASTOR

The above-named person is a registered parishioner at St. Peter Chanel parish and is, to the best of my knowledge, initiated in the sacraments of the Church, is in canonical good standing, is faithful in attendance at Sunday Mass and in the practice of the Catholic Faith and is worthy to accept the responsibilities of the role of Godparent.

Date \_\_\_\_\_ Pastor \_\_\_\_\_

ST. PETER CHANEL CATHOLIC CHURCH

RETURN ORIGINAL COMPLETE FORM TO:  
St. Peter Chanel Catholic Church  
Attn: Baptism  
11330 Woodstock Rd.  
Roswell, GA 30075

*Parish Seal*