

# ST. JOSEPH CO-CATHEDRAL PARISH

## BAPTISM APPLICATION

[Vol. \_\_\_\_\_ No. \_\_\_\_\_]

NAME OF CHILD \_\_\_\_\_  
First Middle Last

DATE OF BIRTH \_\_\_\_\_ CITY/STATE OF BIRTH \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ SEX *Male / Female*

ADDRESS \_\_\_\_\_  
City/State Zip

E-MAIL ADDRESS: \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ RELIGION \_\_\_\_\_  
(Only if it appears on Birth Certificate)

MOTHER'S NAME \_\_\_\_\_ RELIGION \_\_\_\_\_  
First Maiden Name

DATE OF MARRIAGE \_\_\_\_\_ Do you attend Mass?  
*Regularly Sometimes Never*

MARRIAGE Church/Civil—Church Name & Location \_\_\_\_\_

GODFATHER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ RELIGION \_\_\_\_\_  
Baptized - YES or NO Confirmed - YES or NO

GODMOTHER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ RELIGION \_\_\_\_\_  
Baptized - YES or NO Confirmed - YES or NO

Is either Godparent represented by proxy? YES or NO PROXY NAME \_\_\_\_\_

Was the Child Privately Baptized? \_\_\_\_\_ Was the Child Adopted? \_\_\_\_\_

*CHURCH LAW requires that a candidate for Baptism – for membership in the Church community must be sponsored by a baptized and confirmed member of the Catholic Church who is willing and able to help the child develop and grow in the Catholic Faith. There must be at least one sponsor or godparent. In case where there are two sponsors, one must be male and the other female. The maximum number of sponsors is two. Catholic sponsor(s) must be confirmed. A baptized Christian non-Catholic may not be a sponsor, but may act as a witness. Non-baptized persons may not officially act as a sponsor or a witness to a Baptism of a child in the Catholic Faith.*

Name of Person completing this form \_\_\_\_\_ Date \_\_\_\_\_

Date of Baptismal Seminar \_\_\_\_\_

Parents and Godparents are required to fulfill the Parish program concerning the preparation for Baptism.

DATE OF BAPTISM \_\_\_\_\_ TIME \_\_\_\_\_ NAME OF PRIEST \_\_\_\_\_

Are you registered with St. Joseph Parish? Y/N If not, would you like to register with the Parish? Y/N

**Please attach a copy of the Baby's Birth Certificate or Record from the Hospital when submitting this application.**



**ST. JOSEPH CO-CATHEDRAL**  
**721 CANAL BLVD. P.O. BOX 966**  
**THIBODAUX, LA 70301**  
**Phone (985) 446-1387 Fax (985) 446-6571**  
 Send Correspondence to: Renee' Guillot [rguillot@htdiocese.org](mailto:rguillot@htdiocese.org)

**CERTIFICATE of ELIGIBILITY for SPONSOR in BAPTISM/CONFIRMATION**

Sponsor's Full Name (*in print*) \_\_\_\_\_

Godchild or Candidate's Name: \_\_\_\_\_

The Laws of the Roman Catholic Church (Canons 872 & 874) lists the requirements that a person must possess in order to qualify as a SPONSOR in Baptism and/or Confirmation. A sponsor:

- **MUST** be mature in mind and spirit to undertake the responsibility;
- **MUST** be a Roman Catholic and **NOT** younger than 16 years old;
- **MUST** have received ALL the Sacraments of Initiation, i.e., Baptism, Confirmation, and First Eucharist;
- **MUST** know the basic truths of the Roman Catholic faith and be a PRACTICING Catholic who attends Mass every Sunday and Holy Days of Obligations, who receives the Sacraments regularly, and who practices the faith in his/her own family;
- **MUST** be a Roman Catholic in good standing and not impeded to receive the Sacraments (i.e., married in the Roman Catholic Church, **not** co-habiting or in a civil marriage outside the Catholic Church; not censured by the Church or prohibited by Church authorities)
- **MUST NOT** be the father or mother of the Child and/or candidate.

*The same requirements above apply to a PROXY in case of an emergency.*

**I DECLARE THAT I AM A MEMBER OF THE CATHOLIC CHURCH PARISH LISTED BELOW AND THAT I FULFILL ALL THE REQUIREMENTS OF THE CHURCH LAW FOR SPONSORS. Along with this form, I have included an up-to-date copy of my Baptismal Certificate obtained by my Church of Baptism.**

Signature of Sponsor: \_\_\_\_\_

Address & Phone No.: \_\_\_\_\_

***Information below to be filled out by the Sponsor's Pastor:***

I CERTIFY THAT \_\_\_\_\_ (*Sponsor's Name*)  
 is a member of this Church Community, has fulfilled all the requirements of Canon Law for Sponsors, and is truly qualified to act as a Sponsor for Baptism and/or Confirmation.

Pastor's Name: \_\_\_\_\_  
*Print Name* *Signature*

Church Parish: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_



# St Joseph Co-Cathedral Baptism Seminar

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The following will be attending the Baptismal Seminar:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Religion: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Religion: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Religion: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Religion: \_\_\_\_\_

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Seminar Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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