



**LETTER OF RECOMMENDATION FOR  
CATHOLIC GODPARENT FOR INFANT BAPTISM**

*(PLEASE PRINT IN CAPITAL LETTERS)*

FULL NAME OF INFANT: \_\_\_\_\_  
ID NUMBER / DATE OF BIRTH OF INFANT: \_\_\_\_\_  
BAPTISM DATE & PARISH: \_\_\_\_\_  
FULL NAME OF FATHER: \_\_\_\_\_  
FULL NAME OF MOTHER: \_\_\_\_\_

**DETAILS OF PROPOSED GODPARENT:**

FULL NAMES: \_\_\_\_\_  
CONTACT DETAILS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PARISH OF GODPARENT: \_\_\_\_\_

**RECOMMENDATION OF PARISH PRIEST OF GODPARENT  
(FILLED IN BY GODPARENT PARISH PRIEST)**

I, \_\_\_\_\_ the parish priest of the above mentioned proposed godparent confirm that he/she fills the following requirements of a godparent and that he / she:

(Please tick which is applicable)

<input type="checkbox"/>	Is suitable for the role of helping the Infant to live a Catholic life befitting the baptised
<input type="checkbox"/>	Appears to have the intention on fulfilling the role of godparent and duties
<input type="checkbox"/>	Is not less than 16 years old
<input type="checkbox"/>	Is a Baptised Catholic and has been Confirmed and has received the blessed Eucharist
<input type="checkbox"/>	Lives a life of faith which befits the role of a godparent
<input type="checkbox"/>	Does not labour under a canonical penalty +, whether imposed or declare (+married outside the Catholic Church without convalidation, divorced and re-married Without annulment, and co- habitation)

I certify that he/she is a **registered / non-registered and practicing/ non- practicing** member of this parish who is **known/ unknown** to me and is therefore **eligible / not eligible** to assume the duties and responsibilities of the role of a godparent.

**(Please circle which is applicable)**

Signature of Parish Priest: \_\_\_\_\_

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

Parish Stamp: