



Church of Perpetual Adoration

5465 Citronell Ave. Pico Rivera, CA, 90660
Phone: (562) 942-7300 Fax: (562) 948-3760

Dear Parents and Godparents,

We are very pleased to welcome you to our Baptism Preparation Program. This program is designed to help you, as parents and Godparents, understand the responsibilities assumed by requesting the Sacrament of Baptism for your child. The baptism of your child is a wonderful opportunity to be closer to God in your own life. For those of you who are not married yet by the church, I personally invite you to schedule an appointment to discuss the possibility of marriage. This would be a great and beautiful example for your child/children. You are precious in the eyes of the Lord, and we, the priests of the parish, do care about you and your happiness.

To guide you more, we have prepared the following materials in this package:

1. **Baptismal Registration Form**
2. **Guidelines for Choosing Godparents**
3. **Godparents Registration Form**

Once you complete the forms please come to the Rectory Office, and **please bring this packet completed, with the child's original Birth Certificate, and if you are married by the Church, a certificate of marriage.**

The Stipend for private baptisms, which are on **Saturdays, is \$125.00.** The communal Baptisms in English are on the 1st and 3rd Sunday of every month at 3:30pm, and in Spanish on the 4th Sunday of every month at 3:30pm. The Stipend for **communal Baptisms is \$75.00.** The stipend should be brought on the day of the appointment. **(The preferred payment options include: checks, credit/debit cards, cashier checks or money orders. We do not accept any cash).**

The scheduling of the Baptismal Class is arranged the day of the appointment. Please note - children under the age of six may be baptized without attending Religious Education classes. For children six years old, please contact the Children Faith Formation Office at 562.942.7300 x 222 for registration information.

The Baptismal classes take place on the **Monday before the 1st and 3rd Saturday of the month in English;** the **Monday before the 4th Sunday of the month in Spanish.** Parents and Godparents **must** attend to the class; child care is not provided. Sponsors who live out of the area may attend classes at their local parish; please bring a copy of their certificate the day of the appointment or at least a week prior to the baptism.

May the Lord bless you and strengthen you as you share your love and your faith with your child.

Respectfully signed,

Rev. Diego Cabrera Rojas, S.S.C.

Pastor



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REQUIREMENT WHEN CHOOSING GODPARENTS

The role of Godparents is a very special responsibility that a person assumes. The Godparents are to be living examples of the Catholic Faith for the Godchild. They, along with the Parents, will be the first teachers of those little ones in the ways of faith.

Since this is such an important role, the Godparents themselves must be active Catholics, Confirmed, either single or Married by the Catholic Church, regularly attending Mass and receiving the sacraments. The godparents, according to the Canon Law Code 873, might be: **ONE female sponsor and ONE male sponsor, or only ONE sponsor whether female or male.** No more than two sponsors per child. In addition, they must be sixteen (16) years of age or older.

We ask that you give the attached forms to the Godparents to complete and sign.

BAPTISMAL REGISTRATION FORM

Please type or print:

Full Name of Child (**No Initials**) _____

Date of Birth _____ Gender Female Male

City & State of Birth _____

Name of the Father _____

Father's Religion _____

First and Maiden Name of the Mother _____

Mother's Religion _____

Family Address _____ City _____

Zip Code _____

Home Phone _____ Cell Phone _____

Were parents married in the Catholic Church Yes No

Is the family registered at St. Hilary Church? Yes No

Godfather's Name _____

Godfather's Religion _____

Godmother's Name _____

Godmother's Religion _____

Married Yes No By the Church Yes No

The next section will be filled in at the office on the day of your appointment.

Date of Instructions _____

Date of Baptism _____ Day _____ Time _____

Name of Celebrant _____ ENGLISH _____ SPANISH _____

FOR OFFICE USE ONLY:

RECEIPT #: _____ Date: _____ Initials: _____

Godparent Registration Form

To be selected as a godparent for a prospective member of the Catholic Church is a great privilege. As a Godparent you will be asked to extend in a personal way our Catholic community's welcome and support. Through your companionship you will informally pass on the spirit of our community. You will experience firsthand the challenge new members will face. As you share with them some of your own life and faith as an active member of the Church, you will probably uncover for yourself new dimensions of being a Catholic Christian. Thank you for considering this important role!

Requirements for Godparents

These requirements flow from the above understanding of the Sacraments and roles of Godparents as set forth in the Code of Canon Law.

Godparents must be:

- a. At least 16 years old, baptized, received First Holy Communion, and confirmed.
- b. An active Catholic: attends Sunday and Holy Day masses regularly and participates in the Sacramental life of the Church.

TO BE COMPLETED BY THE GODPARENT:

Your Name:		Age:	
Address:			
City:		State:	ZIP
Home No:		Cell No:	
Church of your Baptism:	•		
City:		State:	
Church of your First Communion:	•		
City:		State:	
Church of your Confirmation:	•		
City:		State:	
If married, were you married in the Catholic Church? <input type="checkbox"/> YES <input type="checkbox"/> NO			

“I understand the responsibilities I am undertaking and I have both the desire and intention to fulfill them”

Godparent's Signature	Date
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Your Name:		Age:	
Address:			
City:		State:	
		ZIP	
Home No:		Cell No:	
Church of your Baptism:	•		
City:		State:	
Church of your First Communion:	•		
City:		State:	
Church of your Confirmation:	•		
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