



***St. Stephen the Martyr Catholic Church***  
***St. Katharine Drexel Mission***

*23331 Sam Fred Road, Middleburg Va 20117*

*Telephone: 540-687-6433 Fax: 540-687-5170*

*Website: [www.saint-stephen.ora](http://www.saint-stephen.ora)*

**ELIGIBILITY STATEMENT FOR THE SACRAMENTS OF  
BAPTISM OR CONFIRMATION**

This is to certify that I, \_\_\_\_\_, am

a registered member of \_\_\_\_\_  
(Name of Parish, City and State)

Please answer **Yes** or **No** to the following questions:

- I am baptized and confirmed in the Catholic Church. \_\_\_\_\_
- I am at least 16 years of age. \_\_\_\_\_
- I try to live my life according to Gospel values, even when they conflict with the value systems of our culture and society. \_\_\_\_\_
- Answer if married, my marriage is recognized as valid by the Catholic Church. \_\_\_\_\_
- I am cohabitating. \_\_\_\_\_
- The statements that I have checked above are true. \_\_\_\_\_

I understand and accept the responsibility that I undertake as a parent. I promise to be a support and example to our child in his/her efforts to live a Catholic life that reflects the spirit and teaching of the Roman Catholic Church.

\_\_\_\_\_  
**SIGNATURE**

**(Sign this form in the presence of the priest)**

\_\_\_\_\_  
**PASTOR**

\_\_\_\_\_  
**DATE**

(Parish Seal)