PARENT AFFIRMATION OF FAITH To be completed by parents who reside outside of our parishes.

All Saints Catholic Community PO Box 89, 39 N. Perry St. New Riegel, Ohio 44853

I,	, and
(Name	of Father)
Name	, wish to have our child
`	baptized in the Catholic Church.
(Name	of Child)
We affirm that we are re	egistered and active members of
(Name	and address of <u>Parents current</u> church/parish)
I affirm that:	
I am a baptiz	ed and confirmed Catholic.
	articipate in the Sunday Eucharistic Liturgy and give witness to my Christ by taking an active part especially by receiving Communion.
	to live out the Gospel message in my daily life and be a support to loing, especially among those who are my responsibility.
according to	to grow in knowledge and understanding of my Catholic faith the opportunities opened to me (i.e. Adult Education, Catholic nd Scripture reading).
and will give	hat I can to bring my child up in the practice of the Catholic Faith, witness to my child by my own daily prayer, participation in the f the Church, and active involvement in my parish.
(Parent Signature)	
(Parent Signature)	