



**CATHOLIC ARCHDIOCESE OF SEATTLE**

**AFFIDAVIT FOR THE PARENT OR WITNESS OF A PERSON RECEIVED INTO  
FULL COMMUNION THROUGH THE RITE OF RECEPTION**

I, \_\_\_\_\_, attest that  
\_\_\_\_\_ was received into  
the Roman Catholic Church through the Rite of Reception on the \_\_\_\_\_ day of \_\_\_\_\_ in  
the year \_\_\_\_\_ at the church of \_\_\_\_\_  
in the city of \_\_\_\_\_.  
The minister of the rite was \_\_\_\_\_.

**Affirmation of Truth**

*(To be completed by witness to the sacrament)*

I affirm that the information above is true to the best of my knowledge.

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

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

Role:  Parent  Sponsor  Minister of Sacrament  Other witness

**Witness to Signature**

I certify that the above signature was made in my presence.

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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