



Part A: To be **completed by Sponsor**; check all that apply.

† I will assist the person I am sponsoring to live out the Catholic faith by my prayers, support, and example.

the Sponsor for _____ for the Sacrament of Confirmation.
Print Candidate's Name

Sponsor's Signature and Date

Sponsor's Address: _____

Address City, State Zip



Part B: *Must be completed by Parish Priest or Church Office of Sponsor's Parish*

Name of Sponsor: (Please Print) _____

The above named person is a member of our Parish and to the best of my knowledge is a practicing Catholic who fulfills the requirements of Sponsor for the Sacrament of Confirmation.

Priest/Pastoral Staff Signature
Date

CHURCH
SEAL

Church Name: _____

Address: