

CONFIRMATION SPONSOR INFORMATION FORM

Confirmation Student _____

I acknowledge that my sponsor is:

_____ A Confirmed Catholic and in good standing in their parish. They have celebrated the Sacraments of Baptism, Eucharist and Confirmation.
(Please fill in their parish information requested below.)

_____ 16 years of age or older

_____ Not my parent.

Signature of Confirmation Student

Sponsor's Full Name _____

Relationship to Confirmation Candidate _____

How long have you known your Sponsor? _____

Sponsor's Mailing Address _____

Parish Where Sponsor Is Registered _____

Please complete all information requested

**Sponsor Information should be returned to St Joseph Parish
Office
no later than August 1, 2017.**

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OFFICE USE ONLY:

_____ **Signed Agreement returned by Sponsor**

Parish Verification:

_____ **St. James/Augustine's/Joseph's**

_____ **Certificate received from Sponsor's Parish**