

# Holy Spirit Parish

## Confirmation Sponsor Agreement and Information Form

PART 1

Date \_\_\_\_\_ Sponsor Name \_\_\_\_\_

Sponsor for (Confirmandi's Name) \_\_\_\_\_

### SPONSOR INFORMATION

Date of Birth \_\_\_/\_\_\_/\_\_\_ Place of Birth: \_\_\_\_\_  
(Include city, state and country)

Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_(City) , \_\_\_\_\_(State) \_\_\_\_\_(Zip)

Contact number: \_\_\_\_\_ Email address: \_\_\_\_\_

Sponsor's Parish: \_\_\_\_\_

### To be a sponsor, I realize I must:

1. have the qualifications and the intention of performing the role;
2. have completed the sixteenth year of age;
3. be a Catholic who has been confirmed and has already received the sacrament of First Communion.
4. be an active, practicing Catholic;
5. be receiving the sacraments of Penance and Communion frequently;
6. be married in the Catholic Church, if married;
7. lead a life of harmony with the faith and the role to be undertaken;
8. plan to maintain an ongoing relationship with the candidate in order to promote the candidate's lifelong spiritual growth.

I declare that I am living consistent with the teachings of the Roman Catholic Church and that I will be a long-term spiritual guide and mentor for my candidate.

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

### IF NOT A MEMBER OF HOLY SPIRIT PARISH, MONTGOMERY, ALABAMA:

#### PASTOR VERIFICATION FORM

PART 2

As of \_\_\_\_\_, I verify that the person named above is a confirmed, registered, active parishioner

of \_\_\_\_\_ (Parish Name) and is able to serve in the capacity of Sponsor for Confirmation.

\_\_\_\_\_ (Pastor's Signature) PHONE \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_(City) , \_\_\_\_\_(State) \_\_\_\_\_(Zip)