



Holy Family Catholic Church

9669 Kraft Avenue SE, Caledonia, MI 49316

Phone: 616-891-8867 Fax: 616-891-1346 Website: www.holyfamilycaledonia.org

Verification of Eligibility as a Confirmation Sponsor

I acknowledge that to serve as a Sponsor I must meet the following criteria:

- **I am a Roman Catholic who has received the Sacrament of Confirmation** Yes___ No___
- **I am currently receiving the Sacrament of the Holy Eucharist.** Yes___ No___
- **I am at least sixteen years of age.** Yes___ No___
- **I will undertake the ministry of a Sponsor and promise to lead a life of faith in harmony with that ministry.** Yes___ No___
- **I affirm that I am not the parent of the child to be Confirmed** Yes___ No___
- **I attend Mass** ___Regularly ___Occasionally ___Seldom ___Never
- **Marital Status** ___Married in the Catholic Church
 ___Married/Remarried but not in the Catholic Church
 ___Marriage Convalidated in the Catholic Church
 ___Never married

If therefore, you seek to be admitted as a Sponsor and are convinced that you qualify in accord with the conditions listed above, kindly make the following solemn affirmation:

I, (print full name) _____, a practicing Catholic who seeks to be admitted as a Sponsor, solemnly affirm that I fulfill the requirements of the Catholic Church for this role as presented above. I intend, with the grace of God, to continue the practice of my Catholic faith, and I will, to the best of my ability, carry out the obligations of my role as Sponsor.

Signature: _____ **Date:** _____

Name of Candidate for Confirmation: _____

(To be completed by home parish)

I hereby testify that _____ **is a registered member of this parish and has affirmed that he/she fulfills all of the requirements to serve as a Sponsor as stated above, according to Canon Law.**

Signature of Parish Priest/Deacon _____ **Date** _____

Name of Parish _____

City and State _____

*Reminder to Sponsor: A Sacramental Record from your parish of Baptism is needed, complete with all Sacrament Notations.