

## **CONFIRMATION SPONSOR AFFIDAVIT**

## Please return this form to the **Confirmation Office**

Confirmation Office St. Mary Immaculate Parish 15629 South Route 59 Plainfield, IL 60544 815-436-2861 815-439-2304 Fax

The Sponsor completes this form & submits it to their home parish for the Pastor's signature and seal.

Candidate's Name	
Sponsor's Name	
Relationship to the Candidate	
Sponsor's Address	
Number and Street	
City, State, Zip code	
Sponsor's Telephone Number	
Name and Address of Sponsor's Parish	
Name Name	
Number and Street	
City, State, Zip code	<del></del>
I understand that I have been chosen by the candidate to help him/her prepare for the Sa of Confirmation. In accepting this privilege and responsibility I acknowledge that I meet to following qualifications as set by the Catholic Church:	
<ul> <li>I am a Catholic who has received the Sacraments of Initiation: Baptism, Confirmation</li> <li>Holy Eucharist.</li> </ul>	tion, and
<ul> <li>I am living a faithful life in accordance with the laws of the Catholic Church.</li> <li>I am at least 16 years of age. If not, the candidate has secured dispensation of thi requirement from the Bishop. (Letter is attached.)</li> <li>I am not the candidate's father or mother.</li> </ul>	S
The candidate and I have discussed preparation activities and my involvement. I understatask as a life-long guide in the Catholic Faith. The candidate and I will be meeting regular discuss Scripture and the progress of preparation activities and requirements.	•
Signature of Sponsor Date	
Signature of Sponsor's Pastor Date	