



Name of Person Receiving Sacrament: _____

Sponsor's Information

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Email address: _____

Affidavit

- 1. Do you attest under oath to the truthfulness of your statements? _____
- 2. Are you at least 16 years of age? _____
- 3. Are you the parent of the child? _____
- 4. Are you a baptized Roman Catholic? _____
- 5. Have you received the sacrament of Confirmation? _____
- 6. Are you able to receive Holy Communion? _____
- 7. If you are single are you cohabitating? _____
- 8. If you are married, is your marriage a valid Catholic marriage? _____
- 9. Do you understand and intend to fulfill your role as a Sponsor? _____

In accepting the role as Sponsor, I hereby assure by my signature that I am a committed and practicing Roman Catholic and that I have answered all questions truthfully.

Sponsor's Signature Date

Signature of Pastor/Delegate: _____

Name of Parish: _____

City: _____ State: _____

Date: ____ / ____ / ____

Church

Seal