



## CONFIRMATION SPONSOR FORM

### ST. MICHAEL THE ARCHANGEL CATHOLIC CHURCH

I, \_\_\_\_\_, a practicing member of \_\_\_\_\_,  
(NAME OF SPONSOR) (NAME OF PARISH)

testify by my answers and signature below that I am qualified to serve as a Confirmation sponsor in the  
Catholic Church for \_\_\_\_\_.

(NAME OF CONFIRMATION CANDIDATE)

**Please select YES or NO for each question that follows:**

- |     |    |   |
|-----|----|---|
| YES | NO | Are you a Roman Catholic?   |
| YES | NO | Are you at least 16 years old? (See a priest or the baptism minister for exceptions.) |
| YES | NO | Have you received Confirmation and Holy Eucharist in the Catholic Church?             |
| YES | NO | Are you free to receive Holy Communion when you come to Mass?                         |
| YES | NO | I am someone other than a parent of this candidate.                                   |

**Answer the following only if married:**

- |     |    |  |
|-----|----|--|
| YES | NO | Was your present marriage celebrated in the presence of a Catholic bishop, priest, or deacon or in another denomination with the written permission of a Catholic bishop? (If not please provide a written explanation.) |
|-----|----|--|

**Answer the following only if unmarried:**

- |     |    |   |
|-----|----|---|
| YES | NO | Are you living with another person in a romantic relationship or as a couple? |
|-----|----|---|

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I sign this document in the presence of a Catholic priest, deacon or pastoral minister of a Catholic parish and understand that by my signature I attest that what I have circled above is truthful.

Sponsor Signature: \_\_\_\_\_

Representative's Signature: \_\_\_\_\_

Church Representative's Title: \_\_\_\_\_

Church Representative's Parish: \_\_\_\_\_ (Church Name and City)

State: \_\_\_\_\_

Date: \_\_\_\_\_

SEAL

St. Michael the Archangel Roman Catholic Church  
804 High House Rd.  
Cary, NC 27513