Saint John the Evangelist Catholic Church SPONSOR ELIGIBILTY CERTIFICATE FOR CONFIRMATION



has asked me to be his/her Confirmation Sponsor at St. John			
(First and Last Name of Youth to be Confirmed)	•		
the Evangelist Catholic Church. I understand that as sponsor, I shall do my best to take care thatbehaves as a true witness of Christ and faithfully fulfills the			
		(Name of Youth)	·
obligations inherent in this Sacrament. I am <u>at least sixteen years of age</u> , and I am a Catholic who has <u>received the sacrament of Confirmation</u> and has already <u>received the sacraments of Baptism and the Holy Eucharist</u> . I strive to lead a life of faith in keeping with the function to be taken on and I am not in any canonical penalty with the Catholic Church. I HEREBY AFFIRM, my faith in the Lord Jesus Christ and my fidelity to the teachings of the Catholic Church.			
		I HEREBY AFFIRM that I practice my faith by regu	larly joining the Sunday celebration of Mass
		and Communion. I HEREBY AFFIRM, that I am a registered member of	
		(Name of Parish of the Spon	nsor) (City, State)
and fulfill my obligation to my parish to the best of	of my ability.		
I DO THEREFORE SOLEMNLY AFFIRM THAT I MEE	T ALL OF THE NECESSARY REQUIREMENTS TO		
	PONSOR.		
(Name of Youth)			
			
(Pastor Signature of Sponsor)	(Sponsor's Signature)		
			
(Please Print Pastor's Name)	(Please Print Sponsor's Name)		
	SPONSOR'S EMAIL ADDRESS		
Church Seal Here			