

## **Sponsor Eligibility Form**

## **Full Name of Confirmandi:**

(First Name)	(Middle Name)		(Last Name)
	Statement of the Sp	onsor:	
am a practicing <b>Catholic</b> whand Eucharist. I promise to show good example, by practicin	o has received the Sa are my faith with my g my Catholic faith, a	craments of Bapt confirmandi to t	he best of my ability,
•			
(First Name)	(Middle Name)	(La	st Name)
(Street Address)		(City, State)	(Zip Code)
( ) - (Phone)	(Ema	il Address)	
(Filone)	(Ellia	ii Addiess)	
	Signature of Spon	sor	
*********	*******	******	*******
	tatement of Sponsor dividual is a registere		member of:
(List the name, address,	city, state, zip code, and	telephone number	of the church)
(Signature of Priest)	(Title)		(Date)