

ELIGIBILITY FORM

Candidate's Information Candidate's Full Name: _____ Seeking the Sacrament of: Confirmation Date to be Administered: Sponsor's Information Sponsor's Full Name: ____ Please read the following statements and check the box to affirm that they are true. These standards are required for anyone seeking to be a sponsor, per the Code of Canon Law (# 874 & 893). I am not this candidate's parent. I am at least 16 years of age. I am a fully initiated Catholic, having received the Sacraments of Baptism, Confirmation, and Eucharist. I am an active member of _____ Catholic Parish and attend Mass on Sundays and Holy Days of Obligation. I bear witness to my faith by following the precepts of the Church, believing the truth professed by the Creed, and adhering to Catholic moral teachings. (If married) My marriage was celebrated per the Church's rite, and we are living out the sacramental understanding of matrimony. (If single) I am living in accordance with the Church's teachings on human sexuality and chastity. I understand the responsibility of being a sponsor and intend to do everything in my power to support the spiritual development of this candidate. Sponsor's Parish Information Phone Number: Parish Name: ___ Parish Address: To the best of my knowledge, this person is an active Catholic in good standing with the Church and able to fulfill the responsibilities associated with sponsoring the Catholic initiation of another. At this parish, I serve as _____ and am authorized to make this statement about our parishioner. Printed Name: _____

After signing and sealing this form, please return to Holy Family Catholic Church (Orlando, FL).

(sponsor's parish seal)

Date:

