



OUR LADY OF THE LAKE – MT. ARLINGTON
1 PARK AVENUE, MOUNT ARLINGTON, NJ 07856
(973) 398-0240

CONFIRMATION SPONSOR CERTIFICATE

I, _____
(NAME OF CONFIRMATION SPONSOR, PLEASE PRINT)

HAVE BEEN REQUESTED TO ACT AS A SPONSOR FOR THE SACRAMENT OF
CONFIRMATION FOR:

(NAME OF PERSON RECEIVING SACRAMENT, PLEASE PRINT)

IN ACCEPTING THIS RESPONSIBILITY, I DECLARE THAT THE FOLLOWING STATEMENTS
ARE TRUE:

- I BELIEVE AND ACCEPT THE TEACHINGS OF THE ROMAN CATHOLIC CHURCH.
- I AM AT LEAST 16 YEARS OF AGE.
- I HAVE RECEIVED THE SACRAMENTS OF BAPTISM AND CONFIRMATION IN THE ROMAN CATHOLIC CHURCH.
- IF MARRIED, I AM IN A VALID MARRIAGE RELATIONSHIP RECOGNIZED BY THE ROMAN CATHOLIC CHURCH.
- I RECEIVE THE SACRAMENTS OF HOLY EUCHARIST AND RECONCILIATION REGULARLY.
- I WILL SHARE, SUPPORT AND HELP DEEPEN THE FAITH OF THE CANDIDATE BEING CONFIRMED, TO THE BEST OF MY ABILITY.

SIGNATURE OF SPONSOR _____

I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE ABOVE MENTIONED PERSON IS
CAPABLE OF ASSUMING THE ROLE OF A CONFIRMATION SPONSOR.

SIGNATURE OF PASTOR _____

NAME OF PARISH _____

ADDRESS OF PARISH _____

DATE _____

{ PARISH SEAL }