

# Most Holy Trinity Catholic Church

720 Telfair Street | PO Box 2446  
Augusta, GA 30903  
www.themostholytrinity.org | 706.722.4944



## Confirmation Sponsor Form

To the Sponsor: Congratulations on being asked to be a sponsor for the Sacrament of Confirmation. To be a sponsor there are several requirements the Church asks of you: 1) must be sixteen years of age or older; 2) have received all three sacraments of initiation, and lead a life in conformity with the faith and the role assumed as a sponsor; and 3) is not the parent of the candidate.

### COMPLETE FORM BELOW:

\_\_\_\_\_  
*Candidate's Name*

#### Statement of Candidate:

I understand that a sponsor for the Sacrament of Confirmation is an important choice to make regarding my final step into full communion with the Church. In choosing this person I understand he/she will be my guide during the coming year as I prepare to become a full initiated member of my Church and the Catholic faith. Therefore, I understand that I must choose a person who is practicing their Catholic faith, and who will be a good example and guide for me.

Candidate's initials: \_\_\_\_\_

#### Statement of faith commitment and practice by Sponsor:

\_\_\_\_\_  
*Sponsor's Name (Please Print)*

I recognize that as a sponsor for this sacrament I am:

- 1) committed to keeping God's commandments as Jesus and the Church have taught me;
- 2) to worship God through prayer; and
- 3) faithfully attending Sunday Mass and to also strive to translate my faith into good examples and works.

I hereby state I am:

1) a baptized, confirmed Catholic;

2) a registered member of \_\_\_\_\_;  
*Name of Parish* *City* *State*

and 3) if married, married according to the laws of the Roman Catholic Church.

I also promise to assist this candidate both before and after the reception of the Sacrament of Confirmation to live the Christian life. Finally, I attest that all the statements above are true.

\_\_\_\_\_  
*Sponsor Signature*

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip*

\_\_\_\_\_  
*Phone Number*

#### Statement of Parish Priest:

This is to certify the person named above is to the best of my knowledge a registered member of this parish.

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Priest's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Church Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

*Church Seal*