

HOLY CROSS PARISH

3012 JACKSON STREET
SIOUX CITY, IOWA 51104

Confirmation Sponsor Certification

Candidate's Name: _____

Sponsor's Name: _____

Dear Sponsor,

As a Confirmation sponsor, you are called to be a role model and good example to the Confirmation candidate, and to help him/her see and understand what it means to be a practicing and involved member of the Catholic Church and the parish community.

To testify that you are willing to do what is expected of you as a sponsor, please read the following statements, check all those that apply, and sign at the bottom. Thank you!

Statement by Sponsor

- I am a baptized and confirmed Catholic.
- ** I am a registered member of _____ Parish in _____.
Church name *City, State*
- I practice my faith, attend Sunday Mass weekly, and receive the Sacraments regularly.
- Or - I am not currently practicing my religion. However, for the spiritual welfare of the candidate and myself, I will begin to attend Sunday Mass weekly and receive the Sacraments of Reconciliation and Holy Eucharist on a regular basis.
- I believe in Jesus Christ and his teachings, which I've come to know through Scripture and the Church.
- I am willing to live by the teachings of Jesus, and to help the candidate, _____, live a life of faith.

Sponsor's Signature: _____

Date: _____

Mailing Address:

**** If you are not an officially registered parishioner of Holy Cross Parish in Sioux City, please have your parish priest or a deacon complete the Statement by Clergy on the back.**



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Statement by Clergy

Directions: This form must be signed by the sponsor's parish priest or deacon, and is required ONLY for sponsors who are not parishioners at Holy Cross in Sioux City.

To the best of my knowledge, _____
Name of Confirmation Sponsor

- ▶ is a registered member of our Parish,
- ▶ attends Mass regularly,
- ▶ participates in the Sacramental Life of the Church,
- ▶ is qualified to be a Confirmation sponsor,

or

▶ is not currently ready to be a sponsor, but has promised to return to the Sacraments and active participation in the Church. Upon fulfillment of this promise, I would be willing to recommend this person as a sponsor.

Comments: _____

Signature of Pastor, Parochial Vicar, or Deacon: _____

Dated

Parish:

Street Address:

City, State, Zip:

Phone Number:

CANDIDATE/MENTOR/PARENT AGREEMENT FORM

CANDIDATE NAME: _____

PARENT(s) NAME: _____

MENTOR NAME: _____

MENTOR'S ADDRESS: _____

Phone and E-mail:

Phone

E-mail

We do hereby commit ourselves to walk together in friendship as a unique expression of our mutual desire to become faithful followers of Jesus Christ and responsible members of His church. We promise to help, support, encourage, and pray for each other. We understand the requirements and responsibilities of the Holy Cross Parish Confirmation Mentoring Program.

Signed: _____
(Candidate Signature)

Signed: _____
(Mentor Signature)

PARENT AFFIRMATION We (I); do hereby affirm this mentoring relationship and give our (my) son or daughter permission to participate in the activities that may result from it. We (I) promise to help, support, encourage, and pray for them.

Signed: _____
(Parent)

Signed: _____
(Parent)

Date: _____