

# Basic Confirmation Information

Name: \_\_\_\_\_  
(First) (Last)

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Age (*Please indicate age at the time of Confirmation Next Fall*) \_\_\_\_\_

Confirmation Name (The name of your Saint) \_\_\_\_\_

This information will be recorded in our permanent church records. Please be accurate.

**Please list the information below and attach your Baptism copy to this form.**

Church of Baptism \_\_\_\_\_

Date of Baptism \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mother's full maiden name: \_\_\_\_\_

Father's name: \_\_\_\_\_

\*Sponsor's name: \_\_\_\_\_  
(Please attach sponsor certificate or letter of eligibility.)

\*Sponsor's Address: \_\_\_\_\_  
\_\_\_\_\_

\*Sponsor's phone number: \_\_\_\_\_

\*Sponsor's Church: \_\_\_\_\_  
(\*Sponsor's will be contacted, please fill in all required information).

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Deadline: December of this year!!***

For Office Use Only:

|            |               |          |        |         |
|------------|---------------|----------|--------|---------|
| Date recv: | Payment plan: | Cash/Ck# | Total: | Posted: |
|------------|---------------|----------|--------|---------|

**Good Shepherd Parish**  
**Confirmation Sponsor Certification**  
**625 Florida Grove Rd, Hopelawn, NJ    Ph: 732-826-4859**

Candidate's Name: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_

I agree to serve as a sponsor for the above-named candidate. In doing so, I accept the responsibility to give him/her my prayerful support, encouragement, and any assistance he/she might require in preparing for the Holy Sacrament of Confirmation.

Furthermore, I attest that I am qualified to act as a sponsor, based on the following:

\_\_\_\_\_ I am a Catholic who has received the Sacraments of Baptism, Eucharist, and Confirmation.

\_\_\_\_\_ I practice my faith by attending Holy Mass regularly on Sundays (or Saturday's evenings) and Holy Days.

\_\_\_\_\_ If married, I am married according to the laws of the Catholic Church.

\_\_\_\_\_ I am at least 16 years old.

Sponsor's Signature: \_\_\_\_\_

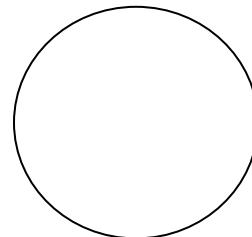
Signature of Sponsor's Parish Priest: \_\_\_\_\_

Name of Parish: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Seal



*(Please complete and return to the Good Shepherd Parish office no later*

***Deadline: December of this year!***

*(If you have any questions, please reach us at the Parish Office Mon-Fri., 9-4pm at 732-826-4859)*