

CERTIFICATE OF ELIGIBILITY FOR:

В	SaptismCor	afirmation	
WITNESS/SPONSOR FOR:	(NT	· · · · · · · · · · · · · · · · · · ·	
	(Name of person being ba	iptized or confirmed)	
SCHEDULED DATE OF CER	REMONY (if known):		
SPONSOR INFORMATION	<u>[</u>		
Ι		(_) affirm that:
(please print fi	irst and last name)	Maiden Name (if applicable)	
I am at least 16 years of age, I Holy Communion and Confirm			nents of Baptism, First
Name and location of pari	sh where I was confirmed		
Confirmation Date			
I participate in the Mass on Sregularly.	undays and Holydays and	receive the Sacraments of Euc	harist and Reconciliation
If married, I am validly marri	ed according to the laws of	the Catholic Church.	
I actively strive to live out my response to those with whom		d to the community life of the G	Church by my loving
I realize that I assume a great faithfully fulfill the obligation prayers and by the Christian	s connected with it. I will g		
By my signature, I attest to the	ne truth of these statement	es:	
Sponsor's Signature		_	
SECTION BELOW TO BE O	COMPLETED BY THE S	PONSOR'S CURRENT PAR	<u>ISH</u>
Priest Signature(Must be	e signed by a Roman Catholic pri	est)	
CHURCH OF			
Address	City	State	Zip
Phone #		Fax #	
Parish Seal required for valid documentation			
36 N. Fusy	worth • Naperville, Illino	ıs 60540 • (630) 355-1081	