



St. Patrick Parish

406 Walnut Street, Yorkville, Illinois 60560 -- 630.553.6671

CONFIRMATION SPONSOR- CERTIFICATE OF ELIGIBILITY

Please return this form to the parish office or to the Confirmation Coordinator. Unfortunately, we can not accept faxed or emailed copies.

I, _____, am a practicing Catholic and am currently attending at
(Sponsor Name)

_____ in _____
(Name of Parish**) (City/State/Zip)

The person for whom I will serve as Sponsor, _____, is preparing for
Confirmation.
(Name of candidate)

The Sacrament will occur in _____ at St. Patrick Parish, Yorkville, Illinois.
(Date- mm/yyyy)

Check all that apply:

- ☐ I am a Roman Catholic.
- ☐ I strive to attend Holy Mass every Sunday.
- ☐ I am at least 16 years of age.
- ☐ I understand my responsibility as a Catholic Godparent.

Marriage (check one):

- ☐ I am married in the Catholic Church.
- ☐ I am married in a Non-Catholic Church.
- ☐ I am married civilly.
- ☐ I am not married.

Sacraments (check all that apply):

- ☐ I have been Baptized.
- ☐ I have received my First Holy Communion in the Catholic Church.
- ☐ I have received the Sacrament of Confirmation in the Catholic Church.

(Signature of Catholic Sponsor)

(Date)

*****To be filled out by the Catholic Church where the Sponsor currently attends**

THIS IS TO CERTIFY

To the best of my knowledge, _____ attends this Parish, is a practicing Catholic, and meets the requirements as required by Canon Law to act as a Sponsor for the Sacrament of Confirmation.

CHURCH
SEAL

Reverend _____
(Signature of Priest or Deacon)

Printed Name _____

Church of _____

City/State _____

Phone Number _____
(Date)