



St. Edmond Roman Catholic Church

4131 W. Congress St.

Lafayette, LA 70506

Phone 337-981-0874 Fax 337-989-1417

Confirmation Sponsor Eligibility Form

1. I declare that I am:
 - *baptized and confirmed Catholic*
 - *(if married) married in the Catholic Church*
 - *not a parent/guardian of this candidate*
 - I am a *registered member of* _____ Church Parish,
in the city of _____.

2. *I believe all that the Catholic Church believes and teaches and truly make a serious effort to live good moral life worthy of imitation.*
3. As a practicing Catholic, I *participate* at Mass on Sundays and Holy Days and I *receive* the Sacraments of Eucharist and Reconciliation *regularly*.
4. I, _____, sponsor, have read the above, understand the role which I am undertaking, and promise to live worthy of this call.

Signature of Sponsor

Mailing Address

Phone Number of Sponsor

Email Address

To be completed by the sponsor's Pastor

I hereby certify that _____ is a registered member of this parish, is a participating Catholic, and is eligible to serve as a sponsor for Confirmation.

Name of Church Parish _____ Date _____

Name of Pastor _____ Church Seal

Confirmation Candidate: _____