

Office of Religious Education  
Most Blessed Sacrament Parish  
15615 Jefferson Hwy., Baton Rouge, Louisiana 70817-6113  
Phone 225-751-5867 ✕ Fax 225-751-6738

## 2022-23 Confirmation Sponsor Eligibility

Please **PRINT** all information in **BLACK** ink.

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

Full Name of Sponsor (No Nicknames) \_\_\_\_\_

Address of Sponsor: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

**Name of Sponsor's Catholic Church Parish of Registration:**

\_\_\_\_\_ in \_\_\_\_\_  
(Name of Sponsor's Catholic Church Parish) (City and State)

I, \_\_\_\_\_, as Confirmation Sponsor for a Most Blessed Sacrament Confirmation Candidate, declare that I am a Baptized and Confirmed Catholic, practicing my Catholic faith as a parishioner at the Parish listed above.

I am in good standing with the Catholic Church according to the records of my Parish of registration. As a practicing Catholic, I participate at Mass on Sundays and Holydays, and I receive the Sacraments regularly.

I believe all that the Catholic Church believes and teaches, and I truly make a serious effort to live a good moral life worthy of imitation.

I realize that I assume a great responsibility before GOD and the Church in becoming a Sponsor. I intend to encourage the Candidate that I am sponsoring in the practice of the Catholic Faith by WORD and EXAMPLE.

\_\_\_\_\_  
SIGNATURE OF SPONSOR

**FOR SPONSOR'S CHURCH PARISH USE ONLY:**

***As Pastor of their Church Parish, I verify that the above named parishioner is eligible to serve as a Confirmation Sponsor.***

Pastor's Name \_\_\_\_\_ Pastor's Signature \_\_\_\_\_

Name of Sponsor's Church Parish \_\_\_\_\_ Date \_\_\_\_\_

***Church Office: Please return the completed and verified form back to MBS by mail to the address above, or by fax to 225-756-5014, or scan and email to mbspsr@gmail.com no later than Sunday, October 2<sup>nd</sup>, 2022.***