

**St. Robert's Confirmation Program  
Sponsor Form**

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

**Sponsor's Full Name:** \_\_\_\_\_

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

\_\_\_\_\_  
Address must include #, Street, City, State, Zip,

**Sponsor's Phone Number:** \_\_\_\_\_

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

**Sponsor is currently a member in good standing at \_\_\_\_\_ parish.**

*I have spoken with my sponsor and they are aware that I have chosen them to be my sponsor. They understand they will need to attend both the Sponsor Meeting and the Confirmation Rehearsal. They have agreed to make every effort to be involved in all aspects of this program and will encourage me as I prepare for the Sacrament of Confirmation.*

**Candidate's Signature:** \_\_\_\_\_

*I am aware of my child's choice for sponsor. Every effort has been made by our family to make the sponsor fully aware of their role and responsibilities. I understand that more information will be mailed to the sponsor and the above is the most recent address information for the sponsor.*

**Parent's Signature:** \_\_\_\_\_

A SPONSOR COMMITS THEMSELVES TO YOU AS...

\*A COMPANION

\* A GUIDE

\*A MODEL OF FAITH

THEY GIVE WITNESS IN THEIR DAILY LIFE THROUGH WORDS & ACTIONS