



CONFIRMATION REGISTRATION FORM

(Please Print)

Candidate Full Name: _____

Date of Birth: _____ Phone: _____

Email: _____

Address: _____ City: _____ State: ___ Zip: ___

Baptism Received in Year: _____ @ Parish: _____

First Communion Received in Year: _____ @ Parish: _____

Father's Name: _____ Phone: _____

Mother's Name: _____ Phone: _____

Parent Email: _____

Sponsor Name: _____ Phone: _____

Sponsor Email: _____

Is sponsor a member of *Holy Family* Catholic Church, New Albany, IN? Yes or No

(If no, Sponsor will need a Good Standing Letter and must meet the criteria on the attached sheet.

Please return the signed sheet to the next Confirmation meeting.)

Confirmation Registration Fee is \$50.00

(If this is a true hardship, please speak with Fr Gries.)

_____ Check or _____ Cash



SPONSOR VERIFICATION FORM

Holy Family Confirmation Candidate Name: _____

The Catholic Church has certain expectations for Sponsors for Confirmation candidates, to ensure they provide a living witness to Catholic Christian discipleship. If the selected Sponsor is **not** a member of *Holy Family* Catholic Parish, New Albany, IN, then please have them obtain a **Letter of Good Standing** from their home parish stating they meet the criteria below or have their priest-pastor (or his delegate) sign the below witness form. This letter must be sent to *Holy Family* prior to the date of Confirmation.

REQUIREMENTS FOR ALL SPONSORS:

- 1) He/she is a baptized Catholic Christian having received the Sacraments of Baptism, First Holy Communion, and Confirmation.
- 2) He/she is 16 years of age or over.
- 3) If single, he/she is living a chaste life, i.e., not “living together” or “cohabiting” with someone in a romantic sense.
- 4) If married, he/she is married in the Catholic Church by an approved Catholic priest/deacon.
- 5) He/she attends Holy Mass every weekend and on Holy Days.

GOOD STANDING WITNESS STATEMENT FOR SPONSOR

I hereby testify to the best of my knowledge that the below stated person, who has been asked to serve as a Sponsor for the Sacrament of Confirmation, does indeed meet all of the above requirements and is an active member of our parish.

Sponsor Name: _____

Parish: _____

Address: _____ City: _____ State: ___ Zip: _____

Phone: _____

Signed: _____ Date: _____

Printed: _____

Position: _____

