



# St. Damien of Molokai Parish

120 Lewis St  
Pontiac MI 48342

Phone: (248) 332-0283  
Fax: (284) 332-7041

I, \_\_\_\_\_  
(Please Print Sponsor's Full Name)

\_\_\_\_\_, declare that I have been chosen to act  
(Relationship to Confirmation Candidate – ex. aunt, cousin, family friend)

as a sponsor for \_\_\_\_\_  
(Please Print Confirmation Candidate's Full Name)

who is to receive the Sacrament of Confirmation at St. Damien of Molokai Parish.

In assuming this responsibility, I testify that:

- **I am at least sixteen years of age.**
- **I have received the Sacraments of Baptism, Confirmation, and Eucharist.**
- **I am living a life in harmony with the teachings of the Catholic Church in faith and morals.**

Understanding the role of sponsor as prescribed by the Church and aware of the obligations and responsibilities of this role, I attest that I am willing and able to accept the role of sponsor in the Catholic Church.

By my signature, I solemnly swear that I fulfill all of the requirements to be a sponsor as described above. I attest to the truth of this statement, so help me God.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Designated Sponsor's Signature*

\_\_\_\_\_  
*Sponsor's Parish*

\_\_\_\_\_  
*Pastor/Delegate's Signature*

