



St. Luke Catholic Church

1606 Blanding Blvd.
Middleburg, Florida 32068

CONFIRMATION SPONSOR ELIGIBILITY FORM

Name of the Person Receiving the Sacrament of Confirmation

SPONSOR INFO BELOW:

Sponsors Must Provide a Copy of Confirmation Certificate

Full Name: _____

Mailing Address: _____

City, State, Zip: _____

Best Contact Phone: _____ Email: _____

Parish of Registration: _____ Date Registered: _____

☐ I am at least 16 years of age.

☐ I have celebrated the sacraments of Baptism, Confirmation, and Eucharist.

☐ I participate in Sunday Mass Regularly

☐ (If Married) My Marriage was celebrated according to the norms of the Catholic Church.

☐ I am NOT Married.

☐ I understand the Responsibility I am undertaking, and both desire and intend to fulfill it faithfully.

☐ I affirm that I meet all the necessary requirements to act as a sponsor.

☐ I am not the parent of the person receiving the sacrament.

Signature of Sponsor

Date

SPONSOR'S PARISH TO COMPLETE BELOW:

Parish Name: _____

Parish Mailing Address: _____

City, State, Zip: _____ Phone: _____

To the best of my knowledge, this person is able to fulfill the responsibilities involved in sponsoring the Catholic initiation of another. Yes ☐ No ☐ Other ☐ (comment on reverse side)

At this parish, I serve as (Circle One) PASTOR, PRIEST, DEACON.

I am authorized to make this statement about our parishioner.

Please Affix Your Parish Seal

Printed Name

Signature

Date