

**This form should be filled out by the sponsor.**



## CONFIRMATION SPONSOR ACCEPTANCE

I accept my responsibility to be a role model and witness of faith and will pray for this candidate during the year and do everything to help him/her grow in faith.

Name of Confirmation Candidate: \_\_\_\_\_

This is to certify that I am a Baptized, Confirmed practicing Catholic and do regularly attend Mass at my home parish:

Sponsor's Name: \_\_\_\_\_

Name of Church Sponsor Attends: \_\_\_\_\_

Street Address of Church: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Date: \_\_\_\_\_

**Please print legibly and complete all information.**

Return this completed form to the Confirmation candidate so they can bring it to the GIFT II Meeting on **Wednesday, November 7, 2018**. The form may also be faxed to 630-543-4672, e-mailed to [stphilipre@gmail.com](mailto:stphilipre@gmail.com), or mailed to:

St. Philip the Apostle Parish Religious Education Office  
1233 W. Holtz Avenue in Addison, IL 60101