



Certificate of Eligibility

Holy Spirit Catholic Community
2003 Hassert Blvd.
Naperville, IL 60564
630-922-0081

WITNESS SPONSOR FOR: _____
(Name of person being confirmed)

SPONSOR INFORMATION

I _____
(please print first and last name, initial each statement and sign below)

Address: _____

Email Address: _____ Phone Number: _____

____ I am at least 16 years of age. I am a practicing Catholic and I have received the sacraments of Baptism, First Holy Communion and Confirmation in the Catholic Church.

Name and City/State of parish where I was confirmed :

Confirmation Date _____

____ I participate in the Mass on Sundays and Holy Days and receive the Sacraments of Eucharist and Reconciliation regularly.

____ I actively strive to live out my commitment to Christ and to the community life of the Church by my loving response to those with whom I come in contact.

____ I realize that I assume a great responsibility before God and the Church in becoming a sponsor and will faithfully fulfill the obligations connected with it. I will give support to the person I am sponsoring by my prayers and by the Christian example of my daily life.

____ Are you married? Yes ____ No ____ If married, were you married according to the laws of the Catholic Church. Yes ____ No ____

By my signature I attest to the truth of these statements

Sponsor Signature

MUST BE COMPLETED AND STAMPED WITH SEAL BY THE SPONSOR'S CURRENT PARISH

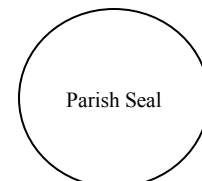
Priest Signature _____
(must be signed by a Roman Catholic Priest at your current parish)

CHURCH NAME _____

Address _____

Phone # _____

DATE _____



(Seal required for valid documentation)