

St. Michael Parish  
Hudson, MA 01749

SPONSOR ELIGIBILITY FORM

**Eligibility requires that Sponsor has celebrated ALL three sacraments of Baptism, First Eucharist and Confirmation**

Name of Child or Candidate \_\_\_\_\_

Sacrament receiving (circle one)

Baptism

Confirmation

Name of Sponsor \_\_\_\_\_

**(Include Maiden Name if Married)**

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_

Catholic Parish where registered and active: \_\_\_\_\_

Baptized Catholic. Name of Church, Town/State, Date:

\_\_\_\_\_

First Communion. Name of Church, Town/State, Date:

\_\_\_\_\_

Confirmation. Name of Church, Town/State, Date:

\_\_\_\_\_

I believe all the Catholic Church believes and teaches and I truly make a serious effort to live a Christian life worthy of imitation. I am a fully Confirmed, practicing Catholic, who attends Mass on Sundays and Holy Days of Obligation, receives Holy Communion and the Sacrament of Reconciliation.

(If living in a marriage union) I have received the Sacrament of Marriage in the Catholic Church or, I am currently working with a priest to receive the sacrament of marriage.

I realize that I am undertaking a great responsibility before God and the Church in becoming a sponsor. I intend to help and encourage the one I am sponsoring to live the Catholic faith and to faithfully fulfill my responsibilities as a sponsor.

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date