

SAINT ANNE CATHOLIC CHURCH

551 Boulder Hill Pass - P. O. Box 670
Oswego, Illinois 60543
630-554-1425 (RE Office)

**Please return to
RE OFFICE by:
August 5, 2019**

SPONSOR AFFIDAVIT

(To be filled out by Catholic Sponsor) - PLEASE PRINT!!!

I have been asked to be the Sponsor for _____ to be held on _____
(Name of child to be Confirmed)
T.B.A: FALL 2020 at Saint Anne Parish, Oswego, Illinois.
(Date)

The Catholic Church guidelines state the following conditions:

I attend Sunday Mass every week and on holy days of obligation where I receive the real presence of Jesus.
I have received the Sacraments of Initiation (Baptism, Eucharist and Confirmation) in the Catholic Church
and am at least 16 years of age.

If married, my marriage was in the Catholic Church or was validated in the Catholic Church.

I understand my responsibility as a Catholic Sponsor.

I meet these Catholic Church guidelines and spiritually accept my responsibility in my role as Sponsor.

I, _____, am a practicing Catholic and am currently registered at _____
(Sponsor name)

_____ in _____
(Name of Catholic Church) (City/State)

Signature of Catholic Sponsor

Date _____

To be filled out *BY* the Catholic Church where the Sponsor is currently registered.

THIS IS TO CERTIFY

_____ That based on the above testimony, I see no reason why _____ cannot
serve as Sponsor.

_____ That based on the above testimony, I leave the decision for _____ to
serve as Sponsor up to your discretion.

Signature of Church Official

CHURCH SEAL

Title

Date