



St. Anthony Parish

511 Main St.
Winters, CA 95694
(530) 795-2230
<https://sa-sm.org>

Confirmation Sponsor Affidavit

Name of Candidate for Confirmation: _____

Name of Sponsor: _____

From the Code of Canon Law C874:

Godparents for the Sacraments of Baptism and Confirmation must be Catholics who have been Baptized, Confirmed, received the Sacrament of the Most Holy Eucharist, at least 16 years old and who lead a life in harmony with the faith and the role to be undertaken.

I Hereby Affirm: my faith in the Lord Jesus Christ, and my fidelity to the teachings of the Catholic Church and that I practice my Catholic Faith by regularly attending Sunday Mass and receiving Holy Communion.

I Hereby Affirm: that I do not live (cohabitate) with someone outside of the Sacrament of Holy Matrimony.

If Married: my marriage has been celebrated in the Catholic Church.
My marriage took place (or is recorded) at: _____ Catholic Church in
_____ (city and state).

If I Have Children: my children are being educated in the Catholic faith.

I Affirm _____ I am a registered member of St. Anthony Church in Winters or St. Martin Mission in Esparto.
_____ I am not a registered member of St. Anthony Church in Winters or St. Martin Mission in Esparto.
I am registered at _____ and fulfill my obligation to my parish to the best of my ability.

I Affirm that I have received the Sacraments of Baptism, Holy Eucharist and Confirmation.

I Affirm therefore, solemnly that I meet all of the necessary requirements to act as a Sponsor for Confirmation, so help me God.

I intend to be a model and example to the candidate as a committed and active Catholic and to be a support to his/her parents in the practice of our mutual faith.

Date Signature of Sponsor

I certify that the prospective sponsor identified above is a registered member of this parish and is, to the best of my knowledge, qualified to serve as a sponsor for the Sacrament of Confirmation.

Parish Seal

Signature of Pastor / Delegate: _____ Date: _____
Parish Name, City and State: _____
Telephone Number: _____

Please return to:
St. Anthony Parish
511 Main St.
Winters, CA 95694
dbarrera@sa-sm.org