



# FIRST COMMUNION SPONSOR FORM

Tel. (323) 560-0187 / Fax (323) 560-8537

I, \_\_\_\_\_  
(Sponsor's Name)

have been ask by \_\_\_\_\_ to be his/her sponsor.  
(Student's Name)

I live at (*address*): \_\_\_\_\_

In the city of: \_\_\_\_\_ Phone:(    ) \_\_\_\_\_

In addition, I belong to the following parish: \_\_\_\_\_

**I realize that according to the Canon Law code (874 and 893) a First Communion Sponsor must:**

1. Be a practicing Catholic, 16 years or older.
2. Have received the Sacraments of Baptism, Holy Communion and Confirmation.
3. Be married in the Catholic Church (if married).
4. Attend Mass every Sunday.
5. Receive the Sacraments of Penance and Holy Communion frequently.
6. Live daily Christian morals and a Catholic Christian lifestyle.
7. Accompany my godson/daughter to the necessary meetings and activities previous to the Communion day. (These dates will be given to you in advance).
8. Attend a Retreat.

**I have read and understood my role as a Sponsor and promise to be faithful to my role. I am proud to be part of the candidate's First Communion Faith Journey.  
I declare that I meet the requirements to be a sponsor.**

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Date

**PLEASE RETURN THE SPONSOR'S FORM TO THE OFFICE OF RELIGIOUS  
EDUCATION WITH THE COPY OF SPONSOR'S RETREAT CERTIFICATE AS SOON  
AS POSSIBLE**

OFICINA SOLAMENTE

Recibido por \_\_\_\_\_

Fecha \_\_\_\_\_

# SPONSOR'S INTERVIEW

Child's Full Name: \_\_\_\_\_

Catechist: \_\_\_\_\_ Room: \_\_\_\_\_

Sponsor: Please complete this form, submit it to the Parish where you belong for authorization and return the forms to the Religious Education Office. Please call to make an appointment.

**Please answer the following questions before the interview with the pastor/delegate:**

*1. Why would you like to share your faith and the love of God with your godson/daughter?*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*2. What are you willing to do in order to help the candidate through their journey?*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*3. What do you think is your commitment with your godson/daughter, after he/she receives the Sacrament?*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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As a Pastor/delegate of the above-named person, I confirm that he/she is ready to be a First Communion Sponsor. He/She meets all the requirements listed in Canon 874 and 893.

**THIS FORM MUST HAVE THE PASTOR/DELEGATE SIGNATURE  
AND THE SEAL OF THE SPONSOR'S CHURCH.**

\_\_\_\_\_  
Pastor or Delegate Signature

\_\_\_\_\_  
Date