



Date of Request: _____

Re: Sacrament Sponsor for (Name of Child) _____

Date of Sacrament: _____

Name of the Sponsor: _____

Phone #: _____

Sponsors Sacraments:

Baptism Date: _____

Church: _____

Address: _____

1st Communion: _____

Church: _____

Address: _____

Confirmation: _____

Church: _____

Address: _____

Please send letter to the Candidates Church listed Below:

Phone: _____

Attn: _____