



CATHOLIC ARCHDIOCESE OF JOHANNESBURG

SPONSOR REGISTRATION FORM

NAME OF PARISH:

PARTICULARS OF THE SPONSOR:

SURNAME:

FIRST NAMES:

DATE and PLACE OF BIRTH:

NAME and SURNAME OF MOTHER:

NAME and SURNAME OF FATHER:

PHYSICAL ADDRESS:

CONTACT NUMBER: (Cell)

E-MAIL ADDRESS:.....

SPONSOR'S REQUIREMENTS:

1. Have you received the Sacrament of Confirmation? **YES** ☐ **NO** ☐

****Please provide proof of the sacrament of confirmation**

2. Are you in good standing with the Catholic Church? (i.e. a Catholic who participates in the Sacraments as prescribed by and following the precepts of the Catholic Church).

YES ☐ **NO** ☐

3. What is your relationship to the person who is going to receive the sacrament?

GODPARENT ☐ **FAMILY MEMBER** ☐ **SPOUSE** ☐

BELONGING TO THE SAME PARISH ☐ **FRIEND** ☐

4. Occupation:

MARRIED ☐ **NOT MARRIED** ☐ **WIDOWED** ☐ **OTHER** ☐

If other, specify:

5. Are you willing to commit yourself to attend the meetings and sessions required by the catechist or parish priest? **YES** ☐ **NO** ☐

6.

NAME OF THE PERSON YOU ARE GOING TO SPONSOR:

I accept the privilege of being Sponsor. I understand the chief duty of a Sponsor is to give a good example. I intend, by God's grace, to be regular in my attendance at Holy Mass and the sacraments.

.....
Date & Place

.....
Signature

Comment from the Parish Priest or catechist:

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