

St. Gabriel the Archangel 32648 N Cave Creek Rd Cave Creek, AZ 85331 480-595-0883 stgacc.org

ACTIVE PARISHIONER VERIFICATION FORM

To the Director of Religious Education:

- I am a Confirmed, practicing Catholic in good standing with the Catholic Church.
- I have received my sacraments of Initiation.
- If married, my marriage is recognized by the Catholic Church.
- I practice my faith and the celebration of my life and God's life at Mass on Sundays.
- I realize the importance of my good example in encouraging all whom I meet in their journey toward a closer relationship with God the Father, Son, and Holy Spirit, and I accept my responsibility as a Confirmation sponsor for:

Confirmation Candidate's Name - First Middl	e Last)	
Sponsor's Printed Name- First Middle Last)		(Sponsor's Signature)
Phone Number)	(E-mail)	
PASTOR VERIFICATION		
•		l, registered, active Parishioner of St. Gabriel d is able to serve in the capacity of Sponsor
Pastor's Signature)		(date)