

**Attention: Parent of 1<sup>st</sup> Communicant**

*Complete the following information before submitting this form:*

Child's full name: \_\_\_\_\_

Day & class time your child attends class  
(for example: *Sundays at 10am*): \_\_\_\_\_

**Our Lady of the Valley  
First Communion  
2017-2018  
Sponsor Contract**

I, \_\_\_\_\_, am submitting this form in order to verify that I will be the  
(Sponsor names - please print)

First Communion sponsor for \_\_\_\_\_ at Our Lady of the Valley  
(child's full name)

Catholic Church. I meet the following requirements in order to be a sponsor:

- I am at least 16 years of age.
- I am fully initiated into the Catholic Church. I have received the sacraments of Baptism, Eucharist and Confirmation.
- I am a practicing Catholic, in good standing with the Church.
- I attend Mass on Sundays and Holy days of obligation.
- I confess my sins at least once a year.
- I observe the days of fasting and abstinence (from meat) established by the Church.
- I help to provide for the needs of the Church according to my abilities.
- I am not the parent of the child I am sponsoring.
- I am married in the Church (if applicable).
- I will attend the Sponsor Retreat on January 27.
- I will attend the First Communion Practice on May 4<sup>th</sup> and Mass on May 6<sup>th</sup>.

\_\_\_\_\_ I certify that I meet the above requirements.  
(initials)

First and Last Name of Sponsor:

\_\_\_\_\_

Mailing address of sponsor:

\_\_\_\_\_

City, State, and zip code:

\_\_\_\_\_

Cell Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_