

# SPONSOR INFORMATION FORM

*(Please return this form any time on or before January 17, 2016.)*

Your Full Name \_\_\_\_\_

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

Sponsor's Street Address \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Sponsor's Email: \_\_\_\_\_

Sponsor's Telephone number: \_\_\_\_\_

Sponsors should be confirmed and practicing Catholics.  
Parents may not be the sponsor for their own children.