



## CATHOLIC ARCHDIOCESE OF SEATTLE

### AFFIDAVIT FOR THE PARENT OR WITNESS OF A CONFIRMED PERSON

I, \_\_\_\_\_, attest that  
\_\_\_\_\_ was confirmed in  
the Roman Catholic Church on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_  
at the church of \_\_\_\_\_  
in the city of \_\_\_\_\_. The minister of confirmation  
was \_\_\_\_\_.

#### **Affirmation of Truth**

*(To be completed by witness to the sacrament)*

I affirm that the information above is true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Role:  Parent  Sponsor  Minister of Sacrament  Other witness

#### **Witness to Signature**

I certify that the above signature was made in my presence.

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_