

Marriage Information

SECTION I

Are you currently married: _____ If YES: Name of Spouse _____
First Middle (Maiden) Last

Spouse's Date of birth: _____ Spouse's Place of Birth: _____
Month/Date/Year City/State

Religious affiliation of present spouse: _____ Date of present marriage _____
Month/Date/Year

Date of Birth: _____ Place of Birth: _____
Month/Date/Year City/State

Place of Marriage _____
Church/City/State

Were you married (check one): _____ by a Catholic Priest _____ By a Civil Magistrate/Justice of the Peace

_____ Other Minister/Please specify: _____

SECTION II

Were you previously married? _____ If yes, how many times were you previously married? _____

If yes, to whom? _____
First Middle (Maiden) Last

When? _____ Where? _____
Month/Date/Year Church/City/State

Were you married (check one): _____ by a Catholic Priest _____ By a Civil Magistrate/Justice of the Peace

_____ Other Minister/Please specify: _____

Religious affiliation of former Spouse: _____ How was marriage terminated? _____

SECTION III

Was your spouse previously married? _____ If YES, How many times was your spouse married? _____

If yes, to whom? _____
First Middle (Maiden) Last

When? _____ Where? _____
Month/Date/Year Church/City/State

Were they married (check one): _____ by a Catholic Priest _____ By a Civil Magistrate/Justice of the Peace

_____ Other Minister/Please specify: _____

Religious affiliation of former Spouse: _____ How was marriage terminated? _____

Please return this completed form to
Josephine Cometa, Director of Religious Education
Our Lady of Lourdes Church
1650 Route 12
Gales Ferry Connecticut 06335
or by email ffo@ololgf.org or call 860-464-7251.