AFFIDAVIT CONCERNING THE FREEDOM TO MARRY

Name of person wishing to marry: _____
(First, Middle and Last Name)

Your full name: _____
(First, Middle and Last Name)

Address: _____
(Address) *City* *State* *Zip*

Are you related to the person named above? _____ If so, how? _____

Was this person baptized? _____ If so, when? _____

Has the person named above ever been married before a priest, minister, or civil official? _____

If so, give details _____

As far as you know, does this person intend to enter into a permanent marriage, lasting until death? _____

Do you know of any reason which could prevent this marriage from taking place? _____

If yes, give details: _____

Do you swear to the truth of your statements? _____

Signature: _____ Date: _____

(This section is to be completed and signed by a Catholic Clergy or Notary Public)

Name of Catholic Clergy or Notary Public: _____

Signature: _____ Date: _____

Parish: _____

SEAL