



DIOCESE OF VENICE IN FLORIDA

AFFIDAVIT CONCERNING THE FREEDOM TO MARRY

of

1. Your name: _____

Address: _____

Street

City

State/Zip

Religion: _____

2. How long have you known the above-mentioned person? _____

What is your relationship to this person? _____

How well are you acquainted with him/her? _____

3. Has the above-mentioned person ever attempted or entered a marriage before this day (in a church, civilly, or by common law)? _____ (Yes or No)

If "yes," how many times (including an existing union which is to be validated)? _____

With whom? _____

Date of Marriage: _____

Place: _____

Before Whom? _____

Was the marriage ever witnessed in the presence of a Catholic Priest? _____ (Yes or No)

How did this marriage cease to exist? _____

4. Is there any reason why the forthcoming marriage of the above-mentioned person would not be valid? _____ (Yes or No). If "yes," please explain: _____

Are there circumstances which might be forcing this person to enter into this marriage? (Yes or No). If "yes," please explain: _____

5. (***Ask only when the above-mentioned person is under 19 years of age***). Have the parents given approval of this marriage? _____ (Yes or No). If "no," what is the reason(s): _____

6. Are you acquainted with the other party to this marriage? _____ (Yes or No). If "yes," is the other party free to enter into this marriage? _____

7. Have you heard either of these persons express any condition or intention contrary to the nature and purpose of Christian marriage? _____ (Yes or No). If "yes," please explain: _____

8. Have you any other pertinent information concerning the forthcoming marriage? _____

Parish Seal

Signature of Person Completing Affidavit

Signature of the Priest

Date: _____ Parish: _____

Rectory Address: _____
Street City State/Zip

Church of Marriage (within the Diocese of Venice): _____