

DIOCESE OF MARQUETTE

M-B PRENUPTIAL AFFIDAVIT

TESTIMONY OF WITNESS FOR _____

This form is to be used in the following cases:
A. To establish freedom to marry when either party is not well known to the pastor/delegate;
B. To prove non-Catholic baptismal status when a certificate is not available.

1. Name _____

Address _____
(street) (city) (state)

2. How long have you known the person whose name appears above? _____

What is your relationship to this person? _____

A. To Establish Freedom to Marry (cc. 1066-1070):

3. Has this person ever contracted or attempted marriage? _____

religious civil common law

How many times? _____ With whom? _____

How resolved? _____
(e.g., death, declaration of invalidity, dissolution by Catholic Church)

Was this marriage (s) ever rectified before a Catholic priest or deacon? _____

4. Do you know of any obstacle (such as relationship, etc.) to the forthcoming marriage of this person?
If yes, what?

5. Is this person mentally, psychologically, and physically capable of fulfilling normal marital life?
If not, please explain:

6. Do you have any reason to suspect that this person does not intend to enter a true, permanent, Christian marriage? If yes, please explain:

7. Is either of the persons being forced in any way to enter marriage against his/her will? If yes, please explain:

8. If either person is a minor, do the parents or guardians consent to the forthcoming marriage?
If not, why are they opposed?

**B. To Establish Baptismal Status in Case of an Unrecorded Valid non-Catholic baptism
(c. 876):**

9. Has this person ever been baptized? If yes, when?

10. Please provide the denomination, the name of the church, and its location:

11. Were you present for this baptism? If not, how do you know that the person has been baptized?

12. Are there other persons who could testify that the person has been baptized? If yes, please provide their names and addresses:

(Or: I freely declare that I received Christian baptism in adult age as indicated above.)

ALL. Do you swear or affirm the truth of the above statements? _____

Signature of Witness _____

Signature of Pastor/Delegate _____

Date _____

Parish and City _____