



**DIOCESE OF FORT WAYNE-SOUTH BEND**

Office of the Vicar General/Chancellor

Archbishop Noll Catholic Center

P.O. Box 390 . 915 South Clinton Street . Fort Wayne, IN 46801

Telephone: (260) 422-4611. Direct Telephone: (260) 399-1419 . Fax: (260) 969-9145

**MARRIAGE REGISTRATION FORM**

**(PLEASE PRINT) This form must be sent to the Chancery:** (a) if a Dispensation, Permission or Nihil Obstat is needed (see page 4); (b) if the marriage will take place in another diocese; (c) if there is a question about the marriage.

<b>GROOM</b>		<b>BRIDE</b>	
<b>RELIGION</b>		<b>RELIGION</b>	
<b>Date of Marriage/Validation</b>	<input type="checkbox"/> Validation <b>Date of Civil Marriage</b> _____	<input type="checkbox"/> Mixed Marriage	<input type="checkbox"/> Teenage Marriage
<b>Priest/Pastoral Minister Arranging Marriage</b>			
<b>Clergy Officiating</b>			
<b>Denomination</b>			
<b>Church of Marriage</b>			<input type="checkbox"/> Delegation Received
<b>Denomination</b>			
<b>Address, City, State, Zip</b>			
<b>Best Man</b>		<b>Maid/Matron of Honor</b>	

**DELEGATION**

Delegation to witness the marriage is needed for VALIDITY of the marriage if the person officiating is not the pastor or associate pastor of the parish in which the marriage takes place.

**Delegation is granted by** \_\_\_\_\_

**Parish** \_\_\_\_\_ **Date** \_\_\_\_\_

**TESTIMONIAL LETTER FROM ANOTHER DIOCESE**

When the forms are filled out in another diocese, they should be sent to the local chancery to be forwarded to the diocesan chancery within which the marriage is to take place.

**Delegate of Bishop** \_\_\_\_\_

**Diocese** \_\_\_\_\_ **Date** \_\_\_\_\_

**PERMISSION**

If the marriage will take place in a parish other than that (a) of both Catholic parties, or (b) of the Catholic party in a mixed marriage, permission of their proper pastor is required. A letter of permission suffices.

**Permission is granted by** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parish** \_\_\_\_\_ **City/State/Zip** \_\_\_\_\_

(Each party should be interviewed under oath. The interviewer should propose the questions and write the answers. The parties may be interviewed separately at the discretion of the interviewer) **Do you solemnly swear to tell the truth in answering the following questions?**

PLEASE PRINT	GROOM	BRIDE
Full Name		
Address		
City, State, Zip		
Home Phone		
Work Phone		
Current Home Parish City/State/Zip		
Father's Name		
Religion		
Mother's Maiden Name		
Religion		
Parent's Address		
Your Date of Birth		
Your Place of Birth		
Religion You Profess		
Baptized	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Date of Baptism		
Denomination		
Church of Baptism		
City/State/Zip		
Convert to Catholicism	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Church of Profession of Faith		
Date of Profession of Faith		
City/State/Zip		
First Communion	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Confirmation	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Extent You Practice Your Faith	<input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom <input type="checkbox"/> Never
Length of Exclusive Courtship		

### AFTER MARRIAGE

- (A) Record Marriage and file papers in parish of marriage.  
 (B) Send Notice of marriage to Catholic parties' parish of baptism.  
 (C) If wedding takes place in non-Catholic church: record marriage and file papers in parish of priest/pastoral minister arranging the marriage.

	<b>GROOM</b>	<b>BRIDE</b>
Have you ever received Holy Orders or made Religious Vows?	[ ] Yes [ ] No	[ ] Yes [ ] No
Are you related to each other by blood or marriage?	[ ] Yes [ ] No	[ ] Yes [ ] No
Are you aware of any physical defect preventing you from marital intimacy?	[ ] Yes [ ] No	[ ] Yes [ ] No
Have you ever been treated by a doctor for an emotional or mental condition? * If the priest/deacon preparing the couple has concerns on this issue, he should ask for a psychological report. Any concerns should be noted in the comments below by the priest/deacon.	[ ] Yes [ ] No	[ ] Yes [ ] No
Do you intend a life-long marriage, totally faithful to your spouse?	[ ] Yes [ ] No	[ ] Yes [ ] No
Do you intend to give your spouse the right to have children?	[ ] Yes [ ] No	[ ] Yes [ ] No
Are these also the intentions of your fiancé?	[ ] Yes [ ] No	[ ] Yes [ ] No
Are you consenting to this marriage freely, without force of any kind?	[ ] Yes [ ] No	[ ] Yes [ ] No
Are you placing any conditions on your marriage? If so, please explain.	[ ] Yes [ ] No	[ ] Yes [ ] No
Have you ever been married previously in a <b>civil or religious</b> ceremony? (If so, please complete the following questions.)	[ ] Yes [ ] No How many times? _____	[ ] Yes [ ] No How many times? _____

*(Please use a separate sheet if more space is needed)*

**GROOM: With whom? (first marriage)** \_\_\_\_\_ **When?** \_\_\_\_\_

**Where?** \_\_\_\_\_ **How ended?** \_\_\_\_\_  
(Date, Place of Annulment, Divorce, Death)

**GROOM: With whom? (second marriage)** \_\_\_\_\_ **When?** \_\_\_\_\_

**Where?** \_\_\_\_\_ **How ended?** \_\_\_\_\_  
(Date, Place of Annulment, Divorce, Death)

**BRIDE: With whom? (first marriage)** \_\_\_\_\_ **When?** \_\_\_\_\_

**Where?** \_\_\_\_\_ **How ended?** \_\_\_\_\_  
(Date, Place of Annulment, Divorce, Death)

**BRIDE: With whom? (second marriage)** \_\_\_\_\_ **When?** \_\_\_\_\_

**Where?** \_\_\_\_\_ **How ended?** \_\_\_\_\_  
(Date, Place of Annulment, Divorce, Death)

Groom Signature \_\_\_\_\_

Bride Signature \_\_\_\_\_

Priest/Deacon Signature \_\_\_\_\_

Parish \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Date \_\_\_\_\_

\*Comments:

**NOTE:**

***The following documents must be submitted if pertinent:***

- Marriage Certificate
- Divorce Decree
- Annulment Decree
- Death Certificate

**DISPENSATION / PERMISSION**

**DISPENSATION/PERMISSION** is requested for:

- MIXED RELIGION & DISPARITY OF CULT “AD CAUTELAM”**, if baptized non-Catholic
- DISPARITY OF CULT**, if non-Catholic was never baptized.
- PERMISSION OF THE BISHOP**, specifically required in the following circumstances, C1071:  
 Marriage of transients; marriage which cannot be recognized or celebrated in accord with the norm of civil law; marriage of a person who is bound by natural obligations toward another party or toward children arising from a prior union; marriage of a person who has notoriously rejected the Catholic faith; marriage of a person who is bound by a censure; marriage of a minor child when the parents are unaware of it or are reasonably opposed to it; marriage to be entered by means of a proxy, mentioned in Canon 1105.
- CONSANGUINITY**, blood relationship to the 4th degree of collateral line, Canon 1091.
- AFFINITY**, any degree of direct line, Canon 1092.

**REASONS FOR DISPENSATION:** (mark all that apply)

**REASONS SUFFICIENT IN THEMSELVES:**

- Danger of invalid marriage
- Well-founded hope of conversion
- Pregnancy
- Validation of invalid marriage

**SUPPLEMENTARY REASONS:**

- Public announcement already made
- All preparations made for wedding
- Other (specify)

**DECLARATION AND PROMISE OF THE CATHOLIC PARTY**

**I REAFFIRM MY FAITH** in Jesus Christ, and with God’s help I intend to continue living that faith in the Catholic Church. I promise to do all in my power to share the faith I have received with our children by having them baptized and raised as Catholics. We have discussed our religious beliefs and practices. We intend to be faithful to one another until death, and we intend a marriage which is permanent.

Verbal Consent

\_\_\_\_\_  
(Signature)

The required promise and declaration have been made by the Catholic party in my presence. The other party has been informed of this requirement, and he/she is aware of the promise and obligation on the part of the Catholic party.

\_\_\_\_\_  
(Priest/Pastoral Minister)

\_\_\_\_\_  
(Parish)

\_\_\_\_\_  
(Date)

**DISPENSATION FROM THE CANONICAL FORM OF MARRIAGE**

*This dispensation is usually intended for a religious marriage service in a non-Catholic church by a non-Catholic clergy person.*

**REASONS FOR DISPENSATION:** (mark all that apply)

- Significant relationship or friendship with non-Catholic clergy person.
- Particular church has special importance to the non-Catholic.
- Achieve family harmony, avoid family alienation.
- Other (specify)

\_\_\_\_\_  
(Name of Pastor of Church of Marriage)

\_\_\_\_\_  
(Delegate of Bishop)

\_\_\_\_\_  
(Diocese)

\_\_\_\_\_  
(Date)

**RESCRIPT**

By virtue of the faculties granted to me, the dispensation/permission requested is herewith granted for the valid and licit celebration of Matrimony.

\_\_\_\_\_  
(Delegate of Bishop)

\_\_\_\_\_  
(Diocese)

\_\_\_\_\_  
(Date)

*N.B. If dispensation is not used, please return this form to the Chancery with an explanation.*

**NIHIL OBSTAT**

This is required (a) if marriage will take place in another diocese; (b) if marriage takes place in a chapel or a church designated by the bishop which is not a parish church; (c) if parties have no fixed residence.

On the basis of the documents presented, there is no objection to the witnessing of this marriage.

\_\_\_\_\_  
(Delegate of Bishop)

\_\_\_\_\_  
(Diocese)

\_\_\_\_\_  
(Date)