

Statement of Freedom to Marry

*To be completed by father, mother, brother or sister of the party
in the presence of a priest/deacon who will witness his / her signature*

Parish of : _____ Diocese of _____

Name of the Person Getting Married: _____

Name of other party _____

Date of Marriage _____ Place of Marriage _____

1. Please state your relationship to the bride / groom (i.e. father, mother, brother or sister)

2. To the best of your knowledge has he /she ever been married either

Religiously or Civilly before? _____ Yes / No

If yes, Please give details: _____

3. Do you know of any reason which could prevent this marriage taking place? _____ Yes/ No

If Yes , Please explain _____

Name of person making this statement : _____

Signature: _____

Address: _____

Tel / Mobile No: _____

Priest /Deacon – Witness: _____

Parish: _____ Diocese: _____

Date: _____

