



ARCHDIOCESE OF DENVER

THE BRIDE – Pre-Nuptial Testimony

Full Name of the Bride _____
Date of Birth _____ Place of Birth _____
Name of Father _____ Religion/Rite _____
Maiden Name of Mother _____ Religion/Rite _____

What is your Religion? _____ **Do you currently practice it?** _____
If Catholic: Date of Baptism _____ **Church** _____
City/State: _____
Rite of Baptism if not Latin Rite _____ **Have you been confirmed?** _____
Have you ever made a solemn religions profession? _____
(If yes, written proof of freedom is required)
Have you ever joined another church by baptism, confirmation, profession of faith or enrollment? _____
If yes, do you currently practice that faith? _____

If Not Catholic: Have you ever been baptized? _____ **Date:** _____
(Obtain certificate if possible – need not be recent)
Church _____ **City/State** _____

- 1. **Are you willing to give to your spouse the “rights of marriage” without restriction?** *(Do you intend to have children? Do you realize marriage calls for a total sharing of your lives?)* _____
- 2. **Do you intend to enter an exclusive life-long union that can only be dissolved by death?** _____
- 3. **Are you marrying freely, without conditions or reservations?** _____
- 4. *(If either party is under 18)* **Do your parents know of this marriage?** _____
- 5. **Do they have any objections?** _____
- 6. **Have you ever been married before, either in a church, civil ceremony, or common law union?** _____
(If yes, complete section on prior marriages after question #10)
- 7. **Are you related to your intended spouse by blood, adoption or marriage?** _____
- 8. **Have you suffered any emotional illness that required professional care?** _____
(If yes, then some evidence of ability to enter marriage is needed)
- 9. **Are there any conditions or reservations to your consent?** _____



ARCHDIOCESE OF DENVER

10. DO YOU SWEAR THE ANSWERS YOU HAVE GIVEN ARE TRUE? _____

Signature of the Bride _____

Date: _____ **Priest/Deacon** _____

Parish _____ **City** _____

IF THERE HAS BEEN A PRIOR MARRIAGE THE FOLLOWING MUST BE COMPLETED:

Name of person to whom you were married _____

Date of Marriage _____ **Date of Divorce** _____

How has it been resolved?

Death of former spouse _____ **Obtain certificate.**

Lack of Form Decree _____ **from** _____ **(Arch/Diocese)**

Decree of Nullity _____ **Granted by** _____ **(Arch/Diocese) Dated** _____

(Obtain copy of the Decree from the party)

Is there a restriction on the decree for the party? _____ **If yes, has it been lifted?** _____

If there are civil obligations for the care of children, have these obligations been or are they being satisfied?

IF ADDITIONAL MARRIAGES HAVE BEEN ENTERED, PROVIDE COMPLETE INFORMATION ON EACH.



ARCHDIOCESE OF DENVER

THE GROOM – Pre-Nuptial Testimony

Full Name of the Groom _____
Date of Birth _____ Place of Birth _____
Name of Father _____ Religion/Rite _____
Maiden Name of Mother _____ Religion/Rite _____

What is your Religion? _____ **Do you currently practice it?** _____
If Catholic: Date of Baptism _____ **Church** _____
City/State: _____
Rite of Baptism if not Latin Rite _____ **Have you been confirmed?** _____
Have you ever made a solemn religions profession? _____
(If yes, written proof of freedom is required)
Have you ever joined another church by baptism, confirmation, profession of faith or enrollment? _____
If yes, do you currently practice that faith? _____

If Not Catholic: Have you ever been baptized? _____ **Date:** _____
(Obtain certificate if possible – need not be recent)
Church _____ **City/State** _____

- 1. **Are you willing to give to your spouse the “rights of marriage” without restriction?** *(Do you intend to have children? Do you realize marriage calls for a total sharing of your lives?)* _____
- 2. **Do you intend to enter an exclusive life-long union that can only be dissolved by death?** _____
- 3. **Are you marrying freely, without conditions or reservations?** _____
- 4. *(If either party is under 18)* **Do your parents know of this marriage?** _____
- 5. **Do they have any objections?** _____
- 6. **Have you ever been married before, either in a church, civil ceremony, or common law union?** _____
(If yes, complete section on prior marriages after question #10)
- 7. **Are you related to your intended spouse by blood, adoption or marriage?** _____
- 8. **Have you suffered any emotional illness that required professional care?** _____
(If yes, then some evidence of ability to enter marriage is needed)
- 9. **Are there any conditions or reservations to your consent?** _____



ARCHDIOCESE OF DENVER

10. DO YOU SWEAR THE ANSWERS YOU HAVE GIVEN ARE TRUE? _____

Signature of the Groom _____

Date: _____ **Priest/Deacon** _____

Parish _____ **City** _____

IF THERE HAS BEEN A PRIOR MARRIAGE THE FOLLOWING MUST BE COMPLETED:

Name of person to whom you were married _____

Date of Marriage _____ **Date of Divorce** _____

How has it been resolved?

Death of former spouse _____ **Obtain certificate.**

Lack of Form Decree _____ **from** _____ **(Arch/Diocese)**

Decree of Nullity _____ **Granted by** _____ **(Arch/Diocese) Dated** _____

(Obtain copy of the Decree from the party)

Is there a restriction on the decree for the party? _____ **If yes, has it been lifted?** _____

If there are civil obligations for the care of children, have these obligations been or are they being satisfied?

IF ADDITIONAL MARRIAGES HAVE BEEN ENTERED, PROVIDE COMPLETE INFORMATION ON EACH.