

3. PREVIOUS MARRIAGE FORM



PREVIOUS MARRIAGE

Today's Date: _____

Your Name: _____
(First) (Middle) (Last)

1. How many times have you been married? _____
2. Name of FIRST SPOUSE: _____ Religion: _____
(First) (Maiden)
3. Date of First Marriage: _____ Place: _____
4. Officiant: _____ Title: _____
5. Is former spouse deceased? Yes / No If Yes, date of Death: _____
Place: _____ Certificate Number: _____
(Copy of death certificate must be filed with the Prenuptial Form)
6. Was former marriage dissolved or declared null by the Church? Yes / No
If Yes, list Diocese and protocol number: _____
(Decree of ecclesiastical nullity must be filed with Prenuptial Form)
Date of Decree: _____
Restrictions: _____

1. Name of SECOND SPOUSE: _____ Religion: _____
(First) (Maiden)
2. Date of Second Marriage: _____ Place: _____
3. Officiant: _____ Title: _____
4. Is former spouse deceased? Yes / No If Yes, date of Death: _____
Place: _____ Certificate Number: _____
(Copy of death certificate must be filed with the Prenuptial Form)
5. Was former marriage dissolved or declared null by the Church? Yes / No
If Yes, list Diocese and protocol number: _____
(Decree of ecclesiastical nullity must be filed with Prenuptial Form)
Date of Decree: _____
Restrictions: _____