ARCHDIOCESE OF PHILADELPHIA PRENUPTIAL INVESTIGATION

THE GROOM

The parties must be questioned separately. The groom is to be asked to tell the truth in answering these questions. Please note any confidential concerns you may have in the comments section on the second page.

I.	GENERAL INFORM	ATION				
	1. What is your full nam	e?				
	3. When and where wer	e you born?				
	4. What is your father's	name and religion?				
	6. Does either parent be	long to an Eastern Church? If s	o, please explain			
	7. How long have you k	nown your future spouse?				
	8. How long have you d	ated your future spouse?				
	9. Have you ever called	off your engagement? If so, wh	y?			
			family or friends?			
	12. Were you civilly mar	ried to the bride before the forth	ncoming marriage in the Church?			
II.	RELIGIOUS BACKO	ROUND				
	If Catholic, please ask:					
		a) When and where were you Baptized or received into the Church?				
	b) Have you made First Communion and have you been confirmed?					
	c) What Catholic education have you received?					
	d) To what parish do you belong?					
	e) Do you attend Mass	and receive the Sacraments res	gularly?			
	e) Do you attend Mass and receive the Sacraments regularly?					
	a) Have you been baptized?					
	-					
	c) Are you interested in learning more about the Catholic faith, especially what the Church believes about marriage					
III.	POSSIBLE IMPEDIMENTS 1. Have you or your intended spouse ever been married before, whether in a religious or civil ceremony or common law arrangement?					
	If yes, please ask:					
		re vou married?				
	a) To whom were you married?b) When and before whom were you married?					
	c) When and how did that union end?					
	d) Do you have any obligations towards that person or towards children arising from that marriage?					
	Please ask for and record the names of two witnesses who can verify freedom to marry: Date Testimony Recei			Date Testimony Received		
	Name	Address	Phone			
	 Name	Address	Phone			

	2.	Have you ever made a public perpetual vow of cha	astity in a religious institute?			
	3.	Have you ever been ordained?				
	4.	. Are you related by blood, marriage, or adoption to your intended spouse?				
		If yes, please explain below in the comments section and contact the Chancery Office for guidance.				
	5.	Do you have any condition that would prevent you from engaging in sexual intercourse?				
	6.		s requiring professional treatment or hospitalization?			
		If yes: Is your fiancée aware of these issues?				
		Please explain below in the comments section or on a separate page				
	7.	Have you signed a pre-nuptial agreement? I	f yes, does it involve the possibility of divorce?			
IV.	KI	KNOWLEDGE AND INTENTIONS				
1 7 .	1.	. Do you believe that your marriage will be permanent and indissoluble, lasting until death?				
	2.		our spouse?			
	3.	Do you believe that marriage is oriented toward the procreation and education of children?				
	4.					
	5.					
	6.		ions which are open to having children?			
	7.	Are you entering marriage freely, without being fo	rced or pressured by anyone or any circumstance?			
	8.		ion problems, trouble with the law, communicable disease, children			
		from a prior relationship, sterility) which you have	e not shared with your future spouse?			
	9.	Have you placed any conditions on your marriage?				
	10	. Would your intended spouse agree with the answer	rs you have given?			
V.		FOR MINORS UNDER 18				
	2.	Do your parents consent to the marriage?				
VI.		OTHER INFORMATION				
	1.	Please name your witnesses for the wedding.	a)			
			b)			
	2.	Where will you live after the marriage?				
			Signature of Groom			
			Signature of Groom			
			Signature of Priest or Deacon			
			Church:			
			Doto			
	Date:					
The	e pri	est will record the following:	COMMENTS			
	_	and place or marriage:				
		riage License Number:				
		diocesan Documentation sent to Chancery:				
			1			

ARCHDIOCESE OF PHILADELPHIA PRENUPTIAL INVESTIGATION

THE BRIDE

The parties must be questioned separately. The bride is to be asked to tell the truth in answering these questions.

Please note any confidential concerns you may have in the comments section on the second page.

Ī.	GENERAL INFORM	ATION					
	1. What is your full name?						
	2. What is your address?						
	3. When and where were you born?						
	4. What is your father's						
	5. What is your mother's						
	6. Does either parent bel						
	7. How long have you ki	nown your future spouse?					
	8. How long have you da	ated your future spouse?					
	 8. How long have you dated your future spouse? 9. Have you ever called off your engagement? If so, why? 10. Has there been any opposition to your wedding from family or friends? 						
		11. Have you received Pre-Cana instructions?					
	12. Were you civilly marr						
II.	RELIGIOUS BACKGROUND						
		1. What is your religion?					
	If Catholic, please ask:						
	-	a) When and where were you Baptized or received into the Church?					
		c) What Catholic education have you received?					
	e) Do you attend Mass	and receive the Sacraments regul	arlv?				
	e) Do you attend Mass and receive the Sacraments regularly?						

III.			C 1 .1 ' 1' '				
	•	1. Have you or your intended spouse ever been married before, whether in a religious or civil ceremony or common law arrangement?					
	arrangement?						
	If yes, please ask:						
		e you married?					
	b) When and bef	a) To whom were you married?					
	 c) When and how did that union end? d) Do you have any obligations towards that person or towards children arising from that marriage? 						
							Please ask for and record the names of two witnesses who can verify freedom to marry: Date Testimony Received
		••••••••••••••••••••••••••••••••••••••					
		Name	Address	Phone			
	Name	Address	Phone				

			stity in a religious institute?				
3. Are you related by blood, marriage, or adoption to your intended spouse?							
4. Do you have any condition that would prevent you from engaging in sexual intercourse?							
		• • • • • • • • • • • • • • • • • • • •					
5. Have you had emotional or psychological problems requiring professional treatment or hospitalization? If yes: Is your fiancée aware of these issues?							
		Please explain below in the comments section					
	6.	<u>•</u>	<i>Syes</i> , does it involve the possibility of divorce?				
IV.		KNOWLEDGE AND INTENTIONS					
			nt and indissoluble, lasting until death?				
			our spouse?				
	3.		procreation and education of children?				
	4.		d of the spouses themselves?				
	5.		ulfill those four obligations?				
	6.		ions which are open to having children?				
	7. 8.		rced or pressured by anyone or any circumstance?ion problems, trouble with the law, communicable disease, children				
	0.		not shared with your future spouse?				
	Q		o				
	10	Would your intended spouse agree with the answer	s you have given?				
V. FOR MINORS UNDER 18							
	1.	Do your parents know you are planning to marry?					
	2.	Do your parents consent to the marriage?					
VI.	Oï	OTHER INFORMATION					
		Please name your witnesses for the wedding.	a)				
		Ç	,				
			b)				
	2	Wil '11 1' C 4 ' 0					
	2.	Where will you live after the marriage?					
			Signature of Bride				
			Signature of Drive				
			Signature of Priest or Deacon				
			Church:				
			Date:				
The priest will record the following:			COMMENTS				
		-					
3.	Deleg	gation given:					
4.	Dispo	ensations or permissions:					
5.	Notic	ces to Parishes of Baptism sent:					
6.	Inter	diocesan Documentation sent to Chancery:					
			1				