

# PRENUPTIAL INVESTIGATION FOR CATHOLIC CHURCHES IN THE STATE OF NEW JERSEY

**Form A-1** is used to verify freedom to marry.

**Form A-2** is used for parental permission of the marriage of a minor, that is, a person under age 18.

**Form A-3** records information on prior marriages.

## The Parties to the Marriage

Name of Groom: \_\_\_\_\_ Name of Bride: \_\_\_\_\_

## The Parties Offering Testimony

Name of Witness: \_\_\_\_\_ Name of Witness: \_\_\_\_\_

Witness for:  groom  bride      Witness for:  groom  bride

Religion: \_\_\_\_\_ Age: \_\_\_\_\_      Religion: \_\_\_\_\_ Age: \_\_\_\_\_

How long have you known him/her? \_\_\_\_\_      How long have you known him/her? \_\_\_\_\_

Relationship to Party: \_\_\_\_\_      Relationship to Party: \_\_\_\_\_

## Form A-1

### AFFIDAVITS VERIFYING THIS COUPLE'S FREEDOM TO MARRY

1. Has this party ever contracted any kind of marriage before?

yes  no

If so, to whom? \_\_\_\_\_

2. Was he/she baptized?

yes  no  do not know

If so, in what religion? \_\_\_\_\_

3. Do you know any reason why this couple should not marry?

yes  no

If so, explain why: \_\_\_\_\_

4. Do you swear these statements are true?

yes  no

1. Has this party ever contracted any kind of marriage before?

yes  no

If so, to whom? \_\_\_\_\_

2. Was he/she baptized?

yes  no  do not know

If so, in what religion? \_\_\_\_\_

3. Do you know any reason why this couple should not marry?

yes  no

If so, explain why: \_\_\_\_\_

4. Do you swear these statements are true?

yes  no

\_\_\_\_\_  
SIGNATURE OF WITNESS NO. 1

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF WITNESS NO. 2

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PASTORAL MINISTER/NOTARY

\_\_\_\_\_  
SIGNATURE OF PASTORAL MINISTER/NOTARY

PARISH SEAL

# Form A-2

## PARENTAL PERMISSION FOR THE MARRIAGE OF A MINOR, I.E., A PERSON UNDER 18

*If a parent or guardian will not complete form A-2, the marriage requires the permission of the diocesan bishop (form D-1)*

1. Do you consent to the marriage of your son/daughter?  
 yes  no
2. If so, do you feel that this couple is mature enough to marry?  
 yes  no
- If not, why not? \_\_\_\_\_

1. Do you consent to the marriage of your son/daughter?  
 yes  no
2. If so, do you feel that this couple is mature enough to marry?  
 yes  no
- If not, why not? \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PARENT NO. 1                      DATE

\_\_\_\_\_  
SIGNATURE OF PARENT NO. 2                      DATE

# Form A-3

## INFORMATION CONCERNING EACH AND EVERY PRIOR MARRIAGE

### Prior Marriage(s) of the Groom

First marriage date: \_\_\_\_\_  
To whom? \_\_\_\_\_  
City of marriage: \_\_\_\_\_  
Officiant:  civil  religious  common law  
How did it end?  death  civil divorce/annulment  
 Catholic dissolution/annulment  
Date: \_\_\_\_\_ (Arch)Diocese: \_\_\_\_\_  
Protocol Number: \_\_\_\_\_  
Current address of former spouse:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Prior Marriage(s) of the Bride

First marriage date: \_\_\_\_\_  
To whom? \_\_\_\_\_  
City of marriage: \_\_\_\_\_  
Officiant:  civil  religious  common law  
How did it end?  death  civil divorce/annulment  
 Catholic dissolution/annulment  
Date: \_\_\_\_\_ (Arch)Diocese: \_\_\_\_\_  
Protocol Number: \_\_\_\_\_  
Current address of former spouse:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Second marriage date: \_\_\_\_\_  
To whom? \_\_\_\_\_  
City of marriage: \_\_\_\_\_  
Officiant:  civil  religious  common law  
How did it end?  death  civil divorce/annulment  
 Catholic dissolution/annulment  
Date: \_\_\_\_\_ (Arch)Diocese: \_\_\_\_\_  
Protocol Number: \_\_\_\_\_  
Current address of former spouse:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Second marriage date: \_\_\_\_\_  
To whom? \_\_\_\_\_  
City of marriage: \_\_\_\_\_  
Officiant:  civil  religious  common law  
How did it end?  death  civil divorce/annulment  
 Catholic dissolution/annulment  
Date: \_\_\_\_\_ (Arch)Diocese: \_\_\_\_\_  
Protocol Number: \_\_\_\_\_  
Current address of former spouse:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

***A copy of any and every death certificate, civil divorce decree or civil annulment, Catholic decree of annulment or a Catholic decree of dissolution must be attached to this form.***