

BRIDE QUESTIONNAIRE

Each party is to be interviewed by the cleric separately. The cleric is to pose the questions and record the responses.

BRIDE INFORMATION		
First name:	Date of Baptism:	
Middle name:	Church of Baptism:	
Current last name:	City, State, ZIP:	
Address:	Length of courtship:	
City, State, ZIP:	Length of engagement:	
Parish	Father's name:	
Date of birth:	Father's religion:	
Phone:	Mother's name:	
Email:	Mother's religion:	
FOR CATHOLICS ONLY	CONVERT TO CATHOLICISM: Yes	No □
First Communion: Yes □ No □	If so, name of Church of Baptism or pro	ofession of faith
Confirmation: Yes □ No □		
Extent you practice the faith:	City, State, ZIP:	
Regularly □ Occasionally □ Seldom □ Never □		
QUESTIONS	17:07 18-Zata	
Do you swear to tell the whole truth in answering the following questions?		Yes □ No □
Are you marrying freely, without conditions and reservations?		Yes □ No □
Are you related to your intended spouse by blood, adoption, or marriage?		Yes □ No □
Are you placing any conditions, restrictions or reserva marriage?	ations of any kind to your consent to this	Yes □ No □
Have you ever labored under any serious or prolonged (If yes, please see reverse side*)	mental illness?	Yes □ No □
Do either party's parents have any objections to this marriage?		Yes \square No \square
Are you willing to be faithful to each other until death?		Yes □ No □
Are you open to conceiving children, and caring for and educating them?		Yes □ No □
Are you or your fiancé bound by the impediments of age; sacred orders; public perpetual vow of chastity; abduction; crime; public propriety; or adoption?		Yes □ No □
Is either parent or grandparent a member of, or bap Church? (If yes, please see reverse side**)	tized in, an Eastern Rite of the Catholic	Yes □ No □
Have you ever been married previously in a civil or relig (If yes, please see reverse side***)	gious ceremony?	Yes □ No □

** Please indicate the rite of the Eastern Catholic	Church of:
Father:	Mother:
Paternal Grandfather:	
Paternal Grandmother:	Maternal Grandmother:
*** Prior marriages	^
Attach all the following documents for each marriage Divorce decree, annulment decree, death certificate	
1) Name of other party:	2) Name of other party:
Date:	Date:
Place:	Place:
Has this spouse died?	Has this spouse died?
If so, when?	If so, when?
Has the Catholic Church granted a declaration of nullity or dissolution of this marriage?	nullity or dissolution of this marriage?
If so, name of Tribunal:	
Case number and date: If there are additional prior marriages, provide inform Who will be your witness for the marriage?	
I attest and certify that I have truthfully answered	d the above questions.
Signature of the Bride	Signature of cleric
Date	Printed name and office of the cleric
Parish seal	Parish name
\ Seal /	

* If you have been treated for a serious or prolonged mental illness, please explain: