



GROOM QUESTIONNAIRE

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

GROOM 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

First Communion: Yes ☐ No ☐

Confirmation: Yes ☐ No ☐

Extent you practice the faith:

Regularly ☐ Occasionally ☐ Seldom ☐ Never ☐

CONVERT TO CATHOLICISM: Yes ☐ No ☐

If so, name of Church of Baptism or profession of faith: _____

City, State, ZIP: _____

QUESTIONS

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 reservations of any kind to your consent to this marriage? Yes ☐ No ☐

Have you ever labored under any serious or prolonged mental illness?
(If yes, please see reverse side*) Yes ☐ No ☐

Do either party's parents have any objections to this marriage? Yes ☐ No ☐

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 fiancée 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 baptized in, an Eastern Rite of the Catholic Church? (If yes, please see reverse side**) Yes ☐ No ☐

Have you ever been married previously in a civil or religious ceremony?
(If yes, please see reverse side***) Yes ☐ No ☐

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

**** Please indicate the rite of the Eastern Catholic Church of:**

Father: _____ Mother: _____

Paternal grandfather: _____ Maternal grandfather: _____

Paternal grandmother: _____ Maternal grandmother: _____

***** Prior marriages**

Attach all the following documents for each marriage, as applicable:

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? _____ Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If so, name of Tribunal: _____ If so, name of Tribunal: _____

Case number and date: _____ Case number and date: _____

If there are additional prior marriages, provide information on a separate sheet and check here ☐.

Who will be your witness for the marriage? _____

I attest and certify that I have truthfully answered the above questions.

Signature of the Groom

Signature of cleric

Date

Printed name and office of the cleric



Parish name

Date