



# DIOCESE OF AMARILLO

## WITNESS AFFIDAVIT OF FREEDOM TO MARRY

(cc. 1067; 1069)

**Purpose: To seek your understanding of the bride/groom's intention and readiness to enter into a sacred marriage (including convalidation).**

*Witnesses ideally should be family members or friends who have known the bride/groom for at least ten years.*

**Name of** ☐ **Bride** or ☐ **Groom:** \_\_\_\_\_

1) Do you agree to answer the following questions truthfully insofar as you are aware?

☐ Yes

☐ No

How are you related to this person? \_\_\_\_\_ Year you met this person: \_\_\_\_\_

*(father, mother, brother, sister, friend, etc.)*

2) Does this person intend in this marriage:

a. To give sacrificially of self for the total well-being of each other and the marital partnership? (c. 1055, § 1)

☐ Yes

☐ No\*

b. To accept children lovingly from God and see to their upbringing? (c. 1055, §1)

☐ Yes

☐ No\*

c. To make an unconditional, permanent commitment, lasting until the death of his/her spouse? (cc. 1056; 1102, §1)

☐ Yes

☐ No\*

d. To be faithful to his/her spouse? (c. 1056)

☐ Yes

☐ No\*

3) Was this person ever baptized? (c. 1086)

☐ Yes

☐ No

☐ Uncertain

If yes, which denomination? \_\_\_\_\_

4) Has this person ever been married at any time in his/her life by a priest, deacon, minister, rabbi, civil official, common law, etc.?

(c. 1085) ☐ Yes\*

☐ No

If yes, how many times? \_\_\_\_\_

List the full name(s) of previous spouse(s): \_\_\_\_\_

How did the marriage(s) end? ☐ Divorce ☐ Death of spouse ☐ Catholic annulment ☐ Other: \_\_\_\_\_

If married previously, is this person meeting his/her moral/civil responsibilities to the former spouse(s) and any child/children?

(c. 1071, §1, 3°) ☐ Yes ☐ No\*

5) Is this person related to his/her intended spouse by blood, marriage or legal adoption? (cc. 1091-1092; 1094)

☐ Yes\*

☐ No

6) Has this person been ordained a Catholic priest/deacon or been in a Catholic religious community? (cc. 1087-1088)

☐ Yes\*

☐ No

7) Is any person or circumstance forcing or putting pressure upon the bride/groom to marry? (cc. 1057; 1103)

☐ Yes\*

☐ No

8) Does this person have or has ever had any physical, mental or emotional, alcohol and/or drug related difficulties?

(cc. 1057; 1084; 1095)

☐ Yes\*

☐ No

9) Do the parents (guardians) of the bride/groom have any reservations about this marriage?

☐ Yes\*

☐ No

**In the back of this page (if necessary):**

A) Explain any previous response that included an asterisk (\*).

B) If you know any reason(s) why this marriage should not occur or information you believe should be made known about this proposed union. Please explain.

\_\_\_\_\_  
Type/print name of Witness

\_\_\_\_\_  
Type/Print name of ☐ Priest or ☐ Deacon or ☐ Lay Pastoral Assistant

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Priest or Deacon or Lay Pastoral Assistant

\_\_\_\_\_  
Name of Parish

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Date signed

