



ARCHDIOCESE OF AGAÑA
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INSTRUCTIONS:

1. The priest or deacon to witness the marriage is responsible for the completion of this form. Required for Pre-Nuptial File.
2. Witnesses *ideally* should be family members or friends who have known the bride/groom since early adolescence.

**Witness Affidavit of
Freedom to Marry
FORM B**

Purpose: To seek from the witness understanding of the bride's/groom's intention and readiness to enter into a sacred marriage.

Name of Bride or Groom: _____

The pastor or his delegate, having reminded the party of the sacred character and binding force of an oath, will ask: **Do you solemnly swear to tell the truth and nothing but the truth in answering the questions that shall be proposed to you, so help you God?** _____

QUALIFICATION OF WITNESS:

1. What is your full name? _____
(Please print all information)
2. Your religion? _____
3. What is your relationship to the above-named person? _____
Have you been closely associated with him/her? _____ How long? _____
4. Where does this person live? _____

BAPTISMAL STATUS

5. What is his/her religion? _____
6. How actively does he/she practice his/her religion? _____

ASKED ONLY OF CATHOLICS

Did he/she receive First Holy Communion? Yes No

If Yes, do you know when and where?: _____

Was he/she confirmed? Yes No

If Yes, do you know when and where?: _____

FREEDOM TO MARRY STATUS

7. Has this person ever contracted or attempted marriage (even if civilly or common law)? Yes No

ASKED ONLY IF THERE WAS A PREVIOUS MARRIAGE

To Whom? _____ When? _____

Where? _____

Before whom? Priest Minister Civil Official

Does this marriage bond still exist? Yes No Other _____

If not, how was this dissolved? by Church Annulment by Civil Divorce by Death

Does this person have any obligations arising from justice or charity toward the former spouse of any children born of this union? Yes No Other _____

If yes, are they being fulfilled? _____

INTENT AND CAPACITY

8. Whom does this person intend to marry? _____

Is this party related to his/her intended spouse by blood or marriage? Yes No

If yes, please give details: _____

Insofar as you know, does this party intend to enter a marriage that is a life-long union of exclusive love and affection, open to the bearing of children? Yes No

If not, please give details: _____

Is there anything else you believe you should make known about this proposed marriage? _____

Signature of Witness

Signature of Priest or Deacon

Type/Print name

PARISH SEAL

Parish

City

Date

If deposition is taken outside the Archdiocese of Agaña, it must be approved by Chancery Office of Diocese where witness resides.

Visum est: _____

Title: _____

Date: _____

Place: _____

DIOCESE SEAL