



DIocese OF BRENTWOOD

APPLICATION FOR SIMPLE CONVALIDATION

For Office Use Only:

SC: /

Date:

Parish of

This application form is to be used when applying for a marriage between **two Catholics** to be convalidated.

Groom:

Name (in full) SURNAME

FIRST NAME(S)

Date and place of baptism

Bride:

Name (in full) MAIDEN NAME

FIRST NAME(S)

Date and place of baptism

Present address

Details of marriage to be convalidated:

Date: Place:

Is a copy of the Marriage Certificate attached?

Had either party contracted marriage prior to the above?

Groom: **YES or NO** Bride: **YES or NO**

If yes, please give details. Continue on another sheet if necessary.

Place Date

Was it dissolved by death or divorce, or declared null?

If dissolved by death include a copy of the death certificate; if declared null include a copy of the decree of nullity.

Unless dissolved by death or declared null, **FORMER MARRIAGES MUST BE REFERRED TO THE CHANCERY/TRIBUNAL. NO WEDDING DATE IS TO BE SET BEFORE THIS HAS BEEN PROCESSED.**

Are you satisfied that the marriage will last? **YES or NO**

Are you satisfied that both parties understand that, in the eyes of the Church, they are still free, and that they must give fresh consent to the marriage? **YES or NO**

Proposed Convalidation

Date: Place:

Signature of Priest Applying:

Date: