TESTIMONY OF FREE STATUS
DIOCESE OF ALTOONA-JOHNSTOWN

Groom

Church of Marriage

Bride

Date of Marriage

Address

City/Town

State

Zip Code

The deposition which follows concerns the free status of

Name of Prospective Spouse

Street Address

City/Town and State

I. QUALIFICATIONS OF WITNESS

1. Are you related to this party?
   a. If so, in what way are you related?
   b. If not, how long have you known this party?

2. Are you familiar with the fact that this party is contemplating marriage?

II. BAPTISMAL STATUS

1. Has this party ever been baptized or “christened” in any Christian denomination?
   a. If so, in what denomination?
   b. If so, would you know in what parish church and at what (approximate) age?

III. MARITAL STATUS

1. Has this party ever been married before in any kind of ceremony?
   a. If so, to whom was this party married?
   b. Place and date of this prior marriage?
   c. Before what type of official was it performed?
   d. How was this prior marriage dissolved? (By death or ecclesiastical decree?)

2. Has the Catholic party ever been dispensed from the observance of the Canonical Form (Catholic form) of marriage?

3. Has the Catholic party abandoned the Faith by formal act prior to the wedding? (If applicable)

4. Has the Catholic party ever joined a non-Catholic sect?

Note: Where more than one prior marriage exists, please give the same information for each instance, using the reverse side of this form.
IV. INTENT AND CAPACITY

1. Insofar as you know, does this party intend to enter into a “Christian marriage,” i.e., a life-long union of exclusive love and affection, open to the bearing of children? ____________________________________________________________________________
   If not, please give details. ____________________________________________________________________________

2. Insofar as you know, does this party have the physical, mental capacity and emotional maturity to assume and reasonably fulfill the responsibilities of marriage? ____________________________________________________________________________
   If not, please give details. ____________________________________________________________________________

3. Are you aware of any other obstacle to the proposed marriage on the part of either party? ____________________________________________________________________________
   Note: The Priest should refer to consanguinity, affinity, ligamen, etc.
   If so, please explain. ____________________________________________________________________________

When this deposition is taken outside of the Diocese of Altoona-Johnstown, please forward to the local Chancery for a Visum.

__________________________________________________________________________
Chancellor

Place (Seal of Chancery) Date

Signature of Witness

Signature of Priest

Parish (Seal of Parish)

Place Date