DIOCESE OF ROCKVILLE CENTRE CHANCERY

POST OFFICE BOX 9023

ROCKVILLE CENTRE, NEW YORK 11571-9023

PETITION FOR MIXED MARRIAGE

(Please type or print all information)

Church of _____City:_____

I, the undersigned Priest/Deacon, petition the Diocesan Bishop to grant permission (including any needed dispensation) for the couple name below to contract marriage validly and licitly at:

Church/Place Date of Marriage:	
Groom Name:	Bride Name:
Age: Catholic non-Catholic	Age: Catholic non-Catholic
Address:	Address:
Number and Street	Number and Street
City, State, Zip Father:	City, State, Zip Father:
Mother:	
The non-Catholic is a member of the	
The non-Catholic: was baptized on Date: _	
Church:City, St	ate: has never been baptized
Was non-Catholic Baptism prov	
Canonical Reasons: Spiritual welfare of the p Other	parties Convalidation Danger of an invalid marriage
	Specify
	presence of a priest/deacon): I reaffirm my faith in Jesus Christ and, with c Church. I promise to do all in my power to share the faith I have received holics.
Signature of Catholic	
	he parties regarding the nature, purpose, and sacredness of marriage. The Catholic in my presence and I am certain that the non-Catholic has been nolic.
Date Signature of Priest/Deacon	Priest / Deacon(<i>printed</i>) Telephone number
Please send rescript to me at the following address:	
Final Observations:	
FOR CHANCERY USEPermission to marry a bapti. Dispensation From Disparit	