Galway Cathedral

Declaration of Freedom to Marry



This section is to be completed by	an immediate family member of the bride or groom.			
Name of bride or groom:				
Name of intended spouse:				
Date of marriage:				
Place of marriage:				
Your relationship to the bride or groom:				
.	Mother, father, brother or sister			
To the best of your knowledge, has	s he/she ever been married in the Church before?	Yes	No	(please circle)
If yes, please give details:				
Do you know of any reason which	could prevent this marriage taking place?	Yes	No	(please circle)
If yes, please give details:				
Please sign below in the presence of yo	our priest.			
SECTION B	,			
	riest, and signed by by the person who completed s	ection A.		
Name of person making this declaration:				
Address:				
Signature of person making this declaration:				
making this declaration.	To be signed in the presence of the priest.			
	I attest that the person makin my presence.	g this decl	aration h	າas signed it in
SEAL	Name of priest			
	Signature of priest			
	Date			