

ARCHDIOCESE OF KINGSTON

DIOCESAN TRIBUNAL

390 Palace Road

Kingston, Ontario, Canada

K7L 4T3

(613) 548-4461 (fax) 548-1228

DOCUMENTATION AND FEE STRUCTURE FOR LIGAMEN CASES

Following your interview, the necessary testimonies and letters will be required. As the case develops and data is gathered, we may have to call you for further information. Sometimes we may require additional witness testimony. Please keep in mind that you may need to provide further clarifications of any contradictions that may arise.

Documentation Required:

- Marriage Certificate of previous marriage
- Marriage Certificate of present marriage, if applicable
- Certificate of Divorce
- Baptismal Certificates, if applicable (a recent copy)

Testimonies will be required from the following:

Two witnesses with knowledge of prior marriage (i.e., Parents, Siblings, friends)
Former spouse (if possible).

Fee: \$300.00

The total cost for this process is \$300.00. We require \$100.00 while the tribunal is processing your file. The remaining balance of \$200.00 will be requested when you are notified by letter of our decision. Payment can be made by instalments if this would be more satisfactory. Cheques should be made payable to the *Archdiocese of Kingston*.

Please note that this office WILL NOT be held responsible for any wedding dates which may have been arranged already or that you may be contemplating.

I have read the above statements.

Dated at _____ this _____ day of _____ 20____.

- Petitioner

Witness Name and Title

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LIGAMEN PRELIMINARY APPLICATION FORM

(PLEASE PRINT)

THE PETITIONER

1. SURNAME: (Present) _____
(Maiden) _____

GIVEN NAMES: _____

Male: Female:

2. ADDRESS: _____

POSTAL CODE _____

3. TELEPHONE: Area Code: (_____) _____ (Home)
Area Code: (_____) _____ (Work)

4. OCCUPATION: _____

5. DATE OF BIRTH: _____

PLACE OF BIRTH: _____

6. RELIGION: (Present) _____ (Previous) _____

7. BAPTISM: Yes No DATE: _____

CHURCH OF BAPTISM: _____

PLACE OF BAPTISM: _____

8. Is it your present intention to become a Catholic? Yes No

If you are presently taking instructions, please state where? _____

9. NAME AND ADDRESS OF CHURCH PRESENTLY ATTENDING?

10. PARENTS' NAMES AND ADDRESSES:

FATHER: _____

Address: _____

Religion: _____

MOTHER: (Present) _____ (Maiden) _____

Address: _____

Religion: _____

FORMER SPOUSE

1. SURNAME: (Present) _____

(Maiden) _____

GIVEN NAMES: _____

Male: Female:

2. LAST KNOWN ADDRESS: _____

POSTAL CODE _____

3. TELEPHONE: Area Code: (_____) _____ (Home)

Area Code: (_____) _____ (Work)

4. OCCUPATION: _____

5. DATE OF BIRTH: _____

PLACE OF BIRTH: _____

6. RELIGION: (Present) _____ (Previous) _____

7. BAPTISM: Yes No DATE: _____

CHURCH OF BAPTISM: _____

PLACE OF BAPTISM: _____

8. NAME AND ADDRESS OF CHURCH PRESENTLY ATTENDING: _____

THE MARRIAGE

- 1. Length of acquaintance before marriage: _____
- 2. Date of marriage? _____
- 3. Place of marriage (Name, address and denomination of church): _____

- 4. Was this the first marriage for both of you? Yes No
 (If NO please complete section before "Previous Marriages")
- 5. Names and Birthdates of children: BAPTIZED Yes No
 _____ - _____ Where? _____
 _____ - _____ Where? _____
 _____ - _____ Where? _____
- 6. Date of final separation? _____
- 7. Reasons for marriage breakdown: _____
- 8. Date and place of civil divorce: _____
- 9. Since the above divorce have you entered any other marriages? Yes No

PREVIOUS MARRIAGE (Please complete if you have been married before, and if more than once, please specify details on a separate sheet or reverse side of the form.)

- 1. Which one of you was married previously?

- 2. When and where did this marriage take place? Date: _____
 (Name, address and denomination of church): _____

- 3. Name of the party this marriage was contracted with: _____
 Religion of this party?

- 4. When and where did a civil divorce take place? _____
- 5. Are you able to supply proof by obtaining documentation of this prior marriage(s)? (i.e., Marriage Certificate(s) and Divorce Certificate(s))?

PERSON YOU WISH TO MARRY IN THE CATHOLIC CHURCH

1. SURNAME: (Present) _____
(Maiden) _____
GIVEN NAMES: _____

2. ADDRESS: _____

POSTAL CODE _____

3. TELEPHONE: Area Code: (_____) _____ (Home)
Area Code: (_____) _____ (Work)

4. OCCUPATION: _____

5. DATE OF BIRTH: _____
PLACE OF BIRTH: _____

6. RELIGION: _____
CHURCH OF BAPTISM? _____
APPROXIMATE DATE OF BAPTISM: _____

7. PARENTS' NAMES: FATHER: _____
MOTHER: (Present) _____
(Maiden) _____

8. NAME AND ADDRESS OF CHURCH PRESENTLY ATTENDING:

9. MARITAL STATUS: Never Married Divorced Separated Widowed

10. When did you begin your relationship with the Petitioner? _____

11. If you have been previously married, please give their name, the date and place of this marriage.

12. Names and Birthdates of children: Have the children been baptized? Yes No

Please list the names, addresses and telephone numbers of two witnesses who can testify to the fact that the first husband/wife was still living at the time of your marriage and who would also know this party's religion:

1. NAME, ADDRESS AND TELEPHONE NUMBER OF WITNESS:

RELATIONSHIP TO YOU OR YOUR FORMER SPOUSE? _____

2. NAME, ADDRESS AND TELEPHONE NUMBER OF WITNESS:

RELATIONSHIP TO YOU OR YOUR FORMER SPOUSE? _____

Date

at (Place/Parish)

Signature of Parish Priest

Signature of Petitioner