

ARCHDIOCESE OF KINGSTON
DIOCESAN TRIBUNAL
390 Palace Road
Kingston, Ontario, Canada
K7L 4T3
(613) 548-4461 (fax) 548-1228

DOCUMENTATION AND FEE STRUCTURE FOR PETRINE CASES

Following your interview, the necessary testimonies and letters will be obtained. As the case develops and data is gathered, we may have to call you for further information. Sometimes we required further witnesses for testimonies, clarification of any contradictions.

Documentation Required:

- Marriage Certificate of previous marriage
- Marriage Certificate of present marriage
- Certificate of Divorce
- Baptismal Certificates
 - Petitioner
 - Interested (Catholic) Third Party
 - Baptismal Certificates of any children

Testimonies will be absolutely required from the following:

- Parents
- Siblings
- Former Spouse or Letter to Former Spouse

Fee: \$600.00

The total cost for this process is \$600.00. We require \$200.00 while the tribunal is processing your file. The remaining balance of \$400.00 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 Catholic Marriage Tribunal.

I must also bring to your attention 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

Interested Catholic

Parish Priest / Tribunal Witness

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PETRINE PRELIMINARY APPLICATION FORM

(PLEASE PRINT)

THE PETITIONER

- 1) Surname (Present): _____
(Maiden): _____

Given names: _____
- 2) Address (including postal code): _____
- 3) Telephone numbers: _____
- 4) Occupation: _____
- 5) Date of Birth: _____
- 6) Religion (Current): _____
(Previous): _____
- 7) Baptized: _____
Date, church and place of baptism: _____
- 8) Is it your present intention to become a Roman Catholic? Yes No

If yes, are you taking instruction? Yes No
- 9) Name and address of church presently attending: _____

- 10) Parents names and addresses:
- Father (full name): _____
Religion: _____
Address: _____
- Mother (include maiden name): _____
Religion: _____
Address: _____

THE RESPONDENT

1) Surname (Present): _____
 (Maiden): _____
Given names: _____

2) Address (including postal code): _____

3) Telephone numbers: _____

4) Occupation: _____

5) Date of Birth: _____

6) Religion (Current): _____
 (Previous): _____

7) Baptized: _____

Date, church and place of baptism: _____

8) Name and address of church presently attending: _____

9) Parents names and addresses:

Father (full name): _____
Religion: _____
Address: _____

Mother (include maiden name): _____
Religion: _____
Address: _____

MARRIAGE INFORMATION *(please include maiden names)*

1) Length of acquaintance before marriage? _____

2) Date and place of marriage (name, address and denomination of church)?
 (Include a copy of the Marriage Certificate) _____

3) Was this the first marriage for you? Yes No

Was this the first marriage for your ex-spouse? Yes No

(If NO to either question, please complete section below)

4) Names and birth dates of children of this marriage?

5) Date of final separation _____

6) Date and place of civil divorce: _____
 (Include a copy of Divorce Certificate)

7) Reasons for marriage breakdown? _____

8) Since the above divorce have you entered any other marriage(s)? Yes No

FORMER MARRIAGE OF PETITIONER *(Please complete if you have been married before, and if more than once, please give details on page 4.)*

1) Where and when did this marriage take place (date, name, address and denomination of church)?

2) Name of the party this marriage was contracted with? _____

3) Religion of this person? _____

4) Where and when did a civil divorce take place? _____

PERSON YOU WISH TO MARRY IN THE CATHOLIC CHURCH

1) Surname (Present): _____

Given names: _____

2) Address (including postal code): _____

3) Telephone numbers: _____

4) Occupation: _____

5) Date of Birth: _____

6) Religion (Current): _____
 (Previous): _____

7) Baptized: _____
 Date, church and place of baptism: _____

8) Name and address of church presently attending: _____

9) Marital status: never married divorced widowed

10) INTERESTED CATHOLIC'S PARENTS' NAMES:

Father: _____

Mother: _____

Mother's maiden name: _____

11) When did you begin your present relationship? _____

12) If you are currently in a civil marriage, please give date and place of marriage.
 (A copy of the Marriage Certificate will be required) _____

13) Names and birth dates of children of this marriage?

Have the children been baptized? Yes No

WITNESSES

Please list the names of parents for the non-baptized. If a parent is deceased then we require the names of older siblings. The following witnesses must be informed of this matter and be willing to testify on your behalf when contacted by a delegate of our Office.

PLEASE PRINT

1. Name, address and telephone number of witness:

2. Name, address and telephone number of witness:

3. Name, address and telephone number of witness:

Date

at (Place/Parish)

Signature of Parish Priest

Signature of Petitioner

