

Petition for Declaration of Nullity (Formal Case)

I, the undersigned, petition the Marriage Tribunal of the Diocese of Saginaw to investigate the validity of the marriage listed below. I contend it is invalid according to Catholic Church law based on a defect of consent (canons 1095-1103). I believe this claim will be substantiated by testimonies, documents and evidence.

Petitioner's Signature

Date

PETITIONER		RESPONDENT
Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/>	Name	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/>
	Female's Maiden Name	
	Address	
	City, State, Zip	
	Home Phone/ Work Phone	
	Date and Place of Birth	
	Date and Church of Baptism	
	City of Baptism	
	Religion at time of marriage	
	Religion during marriage	
	Father's Name and Religion	
	Mother's Maiden Name and Religion	
Mother: _____ Yes _____ No Father: _____ Yes _____ No	Parents alive?	Mother: _____ Yes _____ No Father: _____ Yes _____ No

MARRIAGE INFORMATION

Date of marriage: _____ Place: _____

Name/Title of Officiant: _____

City/State: _____ If this was a convalidation of a ceremony outside the Catholic Church, when and where did the original ceremony take place?

Officiant: _____

*****Please include a copy of the CIVIL marriage license*****

DIVORCE INFORMATION

What date did you stop living together? _____ Date of the **final**

divorce decree: _____ Who obtained it? _____

City/County/State: _____

*****Please include a copy of the COMPLETE judgment of divorce*****

OTHER MARRIAGE INFORMATION

Was this the first marriage for both of you? _____ If no, please give pertinent details [name(s), date(s), etc.] on separate paper.

Was this previous marriage(s) resolved by any kind of Tribunal proceeding? _____

If so, please give pertinent details [which Tribunal, protocol number, date]. _____

PRESENT/ANTICIPATED MARRIAGE

Do you plan on remarrying, or have you remarried? _____ If so, to whom?

Has this person been previously married? _____ If so, has that previous marriage been resolved by a Tribunal process? _____ Please give pertinent details. _____

If you have married or are marrying someone who has been previously married, this marriage must be resolved by a Tribunal process unless the previous spouse has passed away.

CHILDREN

Please list the names and birth dates of any children from this marriage.

Name	Date of Birth

Who received legal custody of any minor children? _____

Who received physical custody of any minor children? _____

COUNSELING/HOSPITALIZATION

Did either of you receive any counseling before or during the marriage in question? _____
 If so, please complete the following information.

Which Party? (Pet. or Resp.)	Counselor's Name	Complete Mailing Address	Approximate Beginning and Ending Dates

If either of you were hospitalized for any nervous/mental/emotional condition before or during the marriage in questions, please complete the following information.

Which Party? (Pet. or Resp.)	Name of Hospital	Complete Mailing Address	Approximate Date

PETITIONER'S MANDATE

I hereby appoint _____, a trained Tribunal Procurator, as my Procurator, to represent me in this marriage case. I authorize him/her to execute any necessary acts for me before the Tribunals of First or Subsequent Instances.

Petitioner's Signature

Date

I, the undersigned, accept the appointment of the petitioner as Procurator and I agree to act in the Tribunals of First and Subsequent Instances.

Procurator's Signature

Date

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**PETITIONER'S AUTHORIZATION TO RELEASE
PSYCHOLOGICAL RECORDS AND/OR INFORMATION**

I hereby give my written consent for the release of any and all psychiatric, psychological or medical records concerning my marital difficulties and counseling, my emotional and/or marital problems, or my physical and/or emotional condition, to the Marriage Tribunal of the Diocese of Saginaw. I waive, on behalf of myself and any persons who may have an interest in the matter, all provisions of law relating to the disclosure of confidential information.

I give this authorization with the understanding that the said Marriage Tribunal will keep the information confidential and will use the released information solely for the purpose of judging the marriage case pending before the said Tribunal and any subsequent Marriage Tribunals.

Petitioner's Signature

Date

Procurator's Signature

Place

TRIBUNAL POLICY STATEMENT

In presenting the attached petition, I acknowledge I have read and understand the following:

1. If the Tribunal is able to accept my petition, there is no assurance the final decision will be favorable to me. An affirmative decision depends entirely on the merits of the case, the evidence presented, and the exact reasons the Church recognizes as grounds for nullity.
2. No guarantee can be given to me regarding when the canonical process will be completed.
3. It is my responsibility to provide the Tribunal with all necessary documents, as well as a complete, current and accurate list of all my witnesses.
4. I agree to be available for a personal interview if the Tribunal deems it necessary.
5. **I understand I may NOT set a date for ANY future marriage in the Catholic Church unless/until an affirmative decision is given in this case and ratified by a second church court. No priest or deacon may provide me with even a tentative date for a future marriage in the Catholic Church until this process is completed.**
6. If my case receives an affirmative decision, either the Defender of the Bond or my former spouse may appeal the decision. This may delay setting a date for a forthcoming marriage in the Catholic Church.
7. The judge may place a stipulation on me, pending an assessment of my readiness to enter a fully sacramental marriage. This may also delay setting a date for a forthcoming marriage in the Catholic Church.
8. I will inform the Tribunal of any future changes in my name, address or civil marital status.
9. The Tribunal staff is bound by an oath of confidentiality and only my Procurator-Advocate or I may be given information regarding my case.
10. I swear all the information I have given is the truth to the best of my ability.

Petitioner's Signature

Date

