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## THE ARCHDIOCESE OF SAN FRANCISCO

Metropolitan Tribunal

One Peter Yorke Way, San Francisco, CA 94109-6602 (415)614-5690 FAX (415) 614-5696

## PETITION FOR A DECLARATION OF FREEDOM TO MARRY IN A LACK OF FORM CASE

("Yellow Form")

PETITIONER	[Please print or type]	RESPONDENT	
	Name		
	Maiden Name (if applicable) — Address		
	City, State Zip		
	— Date of Birth		
	<ul><li>Place of Birth</li></ul>		
	<ul><li>Religion</li></ul>		
	<ul><li>Date of Baptism</li></ul>		
	Place of Baptism		
<u>A)</u> <u>B)</u>	A) Number of Marriages B) Number of this	<u>A)</u>	B)
	Marriage		
Place and Date of Marriage:	MARRIAGE IN QUESTI		
Officiant (Judge, Minister, etc.):			
Was a dispensation from Canonical Form granted for this marriage? Was this marriage celebrated in an Orthodox Church? Was this marriage ever convalidated in the Catholic Church? Has the <i>Catholic</i> party (or parties) left the Church by a formal act?			☐Yes ☐No ☐Yes ☐No ☐Yes ☐No ☐Yes ☐No
If "Yes" please indicate the date County, State and Date of Civil I			
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## ATTESTATION OF THE PETITIONER

application is correct and true, to the b contracted nor attempted any other mar application; and I confirm: 1) that thi	by attest that the information given in completing this pest of my knowledge. I further attest that I have never triages in my lifetime other than those indicated on this is marriage to the respondent was never convalidated and 2) that I have never received a Dispensation from the to be celebrated outside of the Church.
Date	Petitioner's Signature
The following documents for this marria  a) Certificate of Baptism for the Car  b) A copy of the Marriage License (c) A copy of the Decree of Civil Dis	tholic Party (issued within the last six months) or Certificate signed by the Officiant
	N OF PASTORAL MINISTER  that no wedding date can be set while this case is before
Date	Priest/Deacon/Pastoral Minister
	Parish
	Mailing Address
	City, State ZIP