CONSENT FOR THE SOLEMNIZATION OF MATRIMONY WHEN ONE OR BOTH PARTIES HAS BEEN THE SPOUSE OF ANOTHER PERSON STILL LIVING

(per Title I, Canon 19, Constitution and Canons of TEC)

NOTES: 1. Please indicate the couple’s intention to be a part of a worshipping community.
2. Although pastoral considerations may be made, the canonical expectation is that the person petitioning for remarriage is a member of the Episcopal Church.
3. A copy of the final divorce decree should accompany this application.
4. All requests must be received by the bishop’s office at least thirty days before response is needed.
5. This form must be accompanied by a letter of recommendation from the officiating clergy stating reasons you are willing to officiate at this wedding.
6. If there has been more than one previous divorce for either party, it is expected that an assessment from a professional counselor will be included in this application.

DATE OF APPLICATION: ______________________________________________

DATE OF PROPOSED MARRIAGE: ______________________________________________

SPOUSE #1 INFORMATION:

Name: ___________________________________________________ Age:  _____________
Marital status: _______________________  Number of proposed marriage:   _____________
Baptized: Yes No  Denominational affiliation:  _________________________________________
Parish (if Episcopal): __________________________________________________________________________

SPOUSE #2 INFORMATION:

Name: _____________________________________________  Age:  ______________
Marital status: _______________________  Number of proposed marriage:  ______________
Baptized: Yes No  Denominational affiliation:  __________________________________________
Parish (if Episcopal): _________________________________________________________________________

SPOUSE #1 DIVORCE INFORMATION:

Name of former spouse(s):  _____________________________________________________________________________
Date/Place of former marriage(s):  _____________________________________________________________________________
Names/ages of children: ____________________________________________________________________________________
Reasons for marital breakdown: _____________________________________________________________________________
Was counseling sought?  Yes No
Explain: ____________________________________________________________________________________________
Court issuing divorce decree: ____________________________________________________________________________
Date divorce issued: _________________________________________________________________________________________________

**SPOUSE #2 DIVORCE INFORMATION:**

Name of former spouse(s): ___________________________________________________________________________________________

Date/Place of former marriage(s): ____________________________________________________________________________________

Names/ages of children: _____________________________________________________________________________________________

Court issuing divorce decree: _________________________________________________________________________________________

Date divorce issued: _________________________________________________________________________________________________

**SPOUSE #1 AND/OR #2: Please describe how care for children of former marriage and former spouse is being addressed.**

_________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________

**CLERGY CERTIFICATION**

I have known the petitioner for ___________________________ (length of time) in the following context:

_________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________

I certify that this couple first signified to me on ___________________________ their intention to be married.  

(Date)

I also certify that I have instructed (or caused competent others to instruct) both parties in the meaning of Holy Matrimony according to the provisions of the Canons of the Episcopal Church.

I respectfully ask your consent to officiate this wedding. ________________________________

(Name of Clergy)

**NOTE:** If the wedding is to be performed outside the geographical limits of the The Diocese of South Carolina, please give the name of the Diocese where it will be held: _______________________________________________________________________

The Venerable L. Calhoun Walpole
Archieacon
On behalf of the Standing Committee

☐ APPROVED

☐ NOT AT THIS TIME

Rev. 2/2020