

**EPISCOPAL DIOCESE OF CENTRAL NEW YORK**  
**BISHOP'S CONSENT FOR THE SOLEMNIZATION OF MATRIMONY**  
**WHEN ONE OR BOTH PARTIES HAS BEEN THE SPOUSE**  
**OF ANOTHER PERSON STILL LIVING**

- 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. All requests must be received by the bishop's office at least thirty days before response is needed.  
4. This form must be accompanied by a letter of recommendation from the officiating clergy stating reasons you are willing to officiate at this wedding.  
5. 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: \_\_\_\_\_

Reasons for marital breakdown: \_\_\_\_\_

Was counseling sought?    Yes    No

Explain: \_\_\_\_\_

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 Diocese of Central New York, please give the name of the Diocese where it will be held: \_\_\_\_\_

\_\_\_\_\_  
*Bishop's Decision*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
The Rt. Rev. Dr. DeDe Duncan-Probe