

NB THIS PERMISSION IS APPLICABLE ONLY FOR WEDDINGS TO BE CELEBRATED WITHIN THE
ARCHDIOCESE OF MILWAUKEE



Application for Permission for a Wedding outside the Parish Church
Or Approved Chapel or Oratory
This application must be completed by a priest or deacon.

Name of Priest/Deacon: _____
Parish: _____ Parish Location: _____
Phone: _____ Email Address: _____
Priest/Deacon who will witness the marriage, if different from submitting Priest/Deacon: _____

Contact information: _____

A. The Couple – Who is the designated contact for questions? Bride Groom
Bride: _____ Baptismal Status: _____
Telephone Number: _____ Email Address: _____
Parish: _____
Groom: _____ Baptismal Status: _____
Telephone Number: _____ Email Address: _____
Parish: _____
Date of Proposed Wedding: _____

B. Place of Proposed Wedding: Indoor Outdoor
The following guidelines apply to all proposed locations.

- The location should be in keeping with the sacred nature of marriage.
- The location should be a physically meaningful place for the couple and provide the couple and their guests with the sense of the sacredness of the occasion.
- The wedding location may not be a bar, a restaurant, casino, on a boat, on the water or other similar location.

Indoor Wedding Location:
Place of Proposed Wedding: _____
Physical Address _____
Website: _____

If this location is not a public venue, please upload photos to this application that fully demonstrate the venue for the wedding.

Outdoor Wedding Location:
Place of Proposed Wedding: _____
Physical Address _____
Website: _____

If this location is not a public venue, please upload photos to this application that fully demonstrate the venue for the wedding.

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Proposed Alternative Indoor Venue (in case of inclement weather): _____

Physical Address: _____ Website: _____

This indoor location is required to be in the same county as the proposed outdoor location. If this location is not a public venue, please upload photos to this application that fully demonstrate the venue for the wedding.

C. Canonical reason(s) for permission (check all that apply):

- Spiritual good of the parties
- Catholic education of the children
- Probability of conversion of non-Catholic
- Danger of attempted marriage
- Validation

Date of attempted marriage: _____

Place of attempted marriage: _____

Officiant: _____

Other (please specify) _____

D. In a few sentences, please describe the reasons the couple is seeking this permission:

Signature of Submitting Priest/Deacon: _____ Date: _____

Applications must be submitted at least 6 months in advance of the proposed wedding date, using one of the following contacts:

Email: chancery@archmil.org Address: PO Box 070912, Milwaukee, WI 53207-0912