

Quaker Marriage Testimony Renewal Form

Couple Information

Partner 1 Full Name

Partner 2 Full Name

Date of Original Marriage

Date of Renewal

Name of Meeting

Renewal Reflections

Please share how the Quaker testimony of marriage has shaped your life together.

What intentions do you hold for your marriage moving forward?

Witnesses

Witness 1 Name

Witness 2 Name

Clerk of Meeting Name