

Application for the Celebration and Blessing of a Marriage DATE OF APPLICATION _____

GROOM

FULL NAME _____

RESIDENCE _____

TELEPHONE _____ EMAIL _____

OCCUPATION _____ BACHELOR OR WIDOWER NUMBER OF THIS MARRIAGE _____

BAPTIZED? YES NO IN WHAT DENOMINATION _____

CONFIRMED? YES NO IN WHAT DENOMINATION _____

COMMUNICANT?? YES NO IN WHAT DENOMINATION _____

AGE _____ DATE OF BIRTH Month _____ Day _____ Year _____

PLACE OF BIRTH: City _____ STATE _____

FATHER'S NAME _____

MOTHER'S FULL NAME (INCLUDING MAIDEN NAME) _____

PARENTS' ADDRESS _____

BRIDE

FULL NAME _____

RESIDENCE _____

TELEPHONE _____ EMAIL _____

OCCUPATION _____ Maiden Widow

If widow, married name _____ NUMBER OF THIS MARRIAGE _____

BAPTIZED? YES NO IN WHAT DENOMINATION _____

CONFIRMED? YES NO IN WHAT DENOMINATION _____

COMMUNICANT?? YES NO IN WHAT DENOMINATION _____

AGE _____ DATE OF BIRTH Month _____ Day _____ Year _____

PLACE OF BIRTH: City _____ STATE _____

FATHER'S NAME _____

MOTHER'S FULL NAME (INCLUDING MAIDEN NAME) _____

PARENTS' ADDRESS _____

THE CELEBRATION AND BLESSING OF A MARRIAGE

LICENSE NO. _____ WHERE ISSUED _____

OFFICIANT _____ DATE _____ TIME OF DAY _____

PLACE: CHURCH _____ CHAPEL _____ RESIDENCE _____

HOLY COMMUNION YES NO ORGANIST YES NO CHOIR YES NO

REHEARSAL YES NO

FLOWERS _____ Cost \$ _____

NAMES OF WITNESSES:

1. _____ 2. _____

PERMANENT ADDRESS AFTER MARRIAGE _____
