

WEDDING FORM

Date of Wedding: _____ Time of Service: _____

Bride Info

First name: _____ Middle name: _____ Last name: _____

Date of Birth: _____ Previously Married: Yes No

Home Address: _____

Home Phone: _____ Cell phone: _____

Email: _____

Current Church Membership: _____

Groom Info

First name: _____ Middle name: _____ Last name: _____

Date of Birth: _____ Previously Married: Yes No

Home Address: _____

Home Phone: _____ Cell phone: _____

Email: _____

Current Church Membership: _____

Bridal Attendants:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Comments: _____

.....
Return completed form to Parish Office Manager for recording in the Parish Records:
For Office Use Only: *Bulletin info*
Wedding recorded in: *Servant Keeper* *Church Record Book* *Statistic Book*
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WEDDING SERVICE INFO

Readings:

Will a unity candle or other remembrance be used?

Yes No

Description:

Special Music: _____

Soloist (s): _____

Rehearsal Date: _____

Rehearsal Time: _____

What county will you be registering your marriage license? Waupaca Shawano

Other: _____

Do you want to use the Parish Hall? Yes No

Do you want to use the church's candelabra's? Yes No

Do you want to use the church's bows? Yes No

What is the address of your future residence? _____

What time would you like the church open for rehearsal dinner?

What time would you like the church open on the date of the wedding?

Do you want the bell tolled after the wedding service? Yes No

Do you want one of our staff to attend the wedding to toll the bell, light candelabras/altar, and turn on the sound system, and close the Sanctuary doors? Yes No

- If you check no for this question, please know you will be responsible to complete these tasks, please talk to the Church Secretary for directions at (715) 754-5201

For Office Use Only:

Return completed form to Pastor. Wedding of: _____