

MARRIAGE INFORMATION FORM

ST. MARY'S EPISCOPAL CHURCH

Today's Date:

Priest: _____ Please indicate: Member Non-Member
Date of Ceremony: _____ Time of Ceremony: _____
Place of Ceremony: St. Mary's Church Other; please indicate: _____
Rehearsal Needed? Yes No If yes, indicate Rehearsal Date & Time: _____
Anticipated Number of Guests: _____ Reception? Yes No If yes, where: _____
Eucharist at Wedding? Yes No Music at Wedding? Yes No
Names of Witnesses: 1) _____ 2) _____
Permanent Address After Marriage: _____

COUPLE INFORMATION

Spouse I Full Name: _____
Address: _____
Email: _____ Phone: _____
Marital Status: Single Divorced Widowed Do you have children? Yes No
Baptized? Yes No If yes, in what Denomination? _____
Confirmed? Yes No If yes, in what Denomination? _____
Date of Birth (M/D/Y): _____ Place of Birth: _____
Father/Parent's Full Name: _____ Place of Birth: _____
Mother/Parent's Full Name: _____ Place of Birth: _____

Spouse II Full Name: _____
Address: _____
Email: _____ Phone: _____
Marital Status: Single Divorced Widowed Do you have children? Yes No
Baptized? Yes No If yes, in what Denomination? _____
Confirmed? Yes No If yes, in what Denomination? _____
Date of Birth (M/D/Y): _____ Place of Birth: _____
Father/Parent's Full Name: _____ Place of Birth: _____
Mother/Parent's Full Name: _____ Place of Birth: _____

Office Notes: Rector Informed Info Sent to Wedding Coordinator Wedding Info. on Calendar
 Deposit Required? Info Sent to Music Director (if applicable) Wedding Packet Sent to Couple