

Information Blank
HOLY MATRIMONY

Date of Application _____
BRIDE'S FULL NAME _____
ADDRESS _____

TELEPHONE _____
E-MAIL ADDRESS _____
EMPLOYER/OCCUPATION _____
WORK TELEPHONE _____
NUMBER OF THIS MARRIAGE _____
MAIDEN OR WIDOW _____
IF WIDOW, GIVE MAIDEN NAME _____
BAPTIZED _____ DENOMINATION _____
CONFIRMED _____ DENOMINATION _____
COMMUNICANT _____ DENOMINATION _____
AGE _____ DATE OF BIRTH _____
PLACE OF BIRTH – CITY _____ STATE _____
FATHER'S NAME _____
ADDRESS _____
MOTHER'S MAIDEN NAME _____
ADDRESS _____

DATE OF CEREMONY _____ TIME _____
GROOM'S FULL NAME _____
ADDRESS _____

TELEPHONE _____
EMPLOYER/OCCUPATION _____
WORK TELEPHONE _____
NUMBER OF THIS MARRIAGE _____
BACHELOR OR WIDOWER _____
BAPTIZED _____ DENOMINATION _____
CONFIRMED _____ DENONINATION _____
COMMUNICANT _____ DENOMINATION _____
AGE _____ DATE OF BIRTH _____
PLACE OF BIRTH – CITY _____ STATE _____
FATHER'S NAME _____
ADDRESS _____

MOTHER'S MAIDEN NAME _____
ADDRESS _____

PERMANENT ADDRESS AFTER MARRIAGE:

PLACE OF CEREMONY:
NAVE _____ CHAPEL _____ OTHER _____
REHEARSAL DATE: _____ TIME: _____
HOLY COMMUNION: YES _____ NO _____
SCRIPTURE READINGS _____

NAME OF WITNESSES (1) _____
(2) _____
PLACE OF RECEPTION _____

OFFICIANT _____
PUBLISH BANNS OF MARRIAGE: YES _____ NO _____
NOTES: _____

