



## APPLICATION FOR MARRIAGE

Date of Marriage \_\_\_\_\_ Time of Service \_\_\_\_\_

Date of Rehearsal \_\_\_\_\_ Time of Rehearsal \_\_\_\_\_

Marriage Preparation (*please circle*)      Pre-Cana Weekend      Letter from another Episcopal Parish

Officiant / Celebrant for the Service (*if known*) \_\_\_\_\_

Will the Marriage Service include Holy Communion? (*please circle*)      Yes / No

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### BRIDE'S INFORMATION

Full Name (*include all middle names*) \_\_\_\_\_

Address  
\_\_\_\_\_  
\_\_\_\_\_

Phone:    Home \_\_\_\_\_      Work \_\_\_\_\_      Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Marital Status: (*Please circle*)    Single      Widowed      Divorced

If divorced indicate number of previous marriages \_\_\_\_\_

Age on Wedding Day \_\_\_\_\_      Birth Date \_\_\_\_\_      Birth Place \_\_\_\_\_

Occupation \_\_\_\_\_

Father's Full Name \_\_\_\_\_

Mother's Full Name (*include Maiden Name*): \_\_\_\_\_

Religious Affiliation \_\_\_\_\_

Have you been      Baptized? (*Please circle*)      Yes / No

   Confirmed? (*Please circle*)      Yes / No

Are you a regularly attending member of Christ Church? (*Please circle*)      Yes / No

Are your parents regularly attending members of Christ Church? (*Please circle*)      Yes / No

[ Are you (*or your parents*) members of another Episcopal church in this Diocese? (*Please circle*)      Yes / No ]

If so, where? \_\_\_\_\_

**GROOM'S INFORMATION**

Full Name *(include all middle names)* \_\_\_\_\_

Address  
\_\_\_\_\_  
\_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Marital Status: *(Please circle)* Single \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_

If divorced indicate number of previous marriages \_\_\_\_\_

Age on Wedding Day \_\_\_\_\_ Birth Date \_\_\_\_\_ Birth Place \_\_\_\_\_

Occupation \_\_\_\_\_

Father's Full Name \_\_\_\_\_

Mother's Full Name *(include Maiden Name)*: \_\_\_\_\_

Religious Affiliation \_\_\_\_\_

Have you been Baptized? *(Please circle)* Yes / No

Confirmed? *(Please circle)* Yes / No

Are you a regularly attending member of Christ Church? *(Please circle)* Yes / No

Are your parents regularly attending members of Christ Church *(Please circle)* Yes / No

[ Are you *(or your parents)* members of another Episcopal church in this Diocese? *(Please circle)* Yes / No ]

If so, where? \_\_\_\_\_

**COUPLE'S FUTURE MAILING ADDRESS**

\_\_\_\_\_  
\_\_\_\_\_

*Both parties please sign this application:*

Bride \_\_\_\_\_ Date \_\_\_\_\_

Groom \_\_\_\_\_ Date \_\_\_\_\_