



PRE-WEDDING REGISTRATION FORM



To Be completed by couple:

Brides Full Name: _____

Current Address: _____

Home Phone: _____ Work phone: _____

Cell Phone: _____ E-mail: _____

Grooms Full Name: _____

Current Address: _____

Home Phone: _____ Work phone: _____

Cell Phone: _____ E-mail: _____

DATE/TIME REQUESTED FOR WEDDING: _____

Date Confirmed by Pastor: _____ on _____

*****No Wedding is entered into the parish schedule until confirmed
by the pastor with the couple*****

For Office Use Only

\$50.00 Non-Refundable Deposit Received to hold date:

Received on _____ by: _____

\$100.00 Received when marriage license presented:

Received on _____ by: _____

Additional Information: