

FOR MARRIAGE PREPARATION CLASSES ONLY

WEDDING REQUEST FORM FOR WEDDINGS HELD OUTSIDE HOLY SPIRIT

Name of Groom: _____

Groom's Mailing Address: _____

Groom's E-mail Address: _____

Groom's Phone (H): _____ **(W):** _____ **(C):** _____

Age of Groom: _____ **Groom's Religion:** _____

If Catholic, are you a registered member of Holy Spirit? YES NO

If yes, for how long? _____

If no, are you a member of another parish? YES - Parish Name _____ NO

Previous marriage? YES NO If yes, check all that apply: Civil Marriage Catholic

Name of Bride _____

Bride's Mailing Address: _____

Bride's E-mail Address: _____

Bride's Phone (H): _____ **(W):** _____ **(C):** _____

Age of Bride: _____ **Bride's Religion:** _____

If Catholic, are you a registered member of Holy Spirit? YES NO

If yes, for how long? _____

If no, are you a member of another parish? YES - Parish Name _____ NO

Previous marriage? YES NO If yes, check all that apply: Civil Marriage Catholic

Date of Wedding: Month/day/year _____

Location: _____

Name of Church: _____

Address: _____

Phone Number: _____

Diocese Church is located in: _____

Clergy Officiating Name of clergy: _____

Clergy Phone number: _____

Clergy email address: _____

Clergy mailing address: _____

DOCUMENTATION REQUIRED BY OFFICIATING CLERGY:

Office Use Only:

Dates of Marriage Prep Classes: _____ Completed _____

By _____