

Wedding Application Form

Date of Application:

City State Zip Cod Phone: Have you been married before? Baptized? Church: Confirmed? Church: Communicant? Church:
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☐ Baptized? Church: Confirmed? Church: Communicant? Church:
Confirmed? Church:
Communicant? Church:
Communicant? Church:
City State Zip Cod
Phone:
Have you been married before?
☐ Baptized? Church:
Confirmed? Church:
Communicant? Church:



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WEDDING OF: Date/Time of Rehearsal:	Date/Time of Wedding:
ALTAR GUILD INFORMATION:	
Type of Service : □ Marriage Office □ Ho	oly Eucharist Clergy:
Location : □ High Altar □ Chapel □ Othe	er: No. of Chalices:
Number of People Attending Rehearsal: _	Wedding Service: ☐ Lesson Book Needed?
FLOWER GUILD INFORMATION:	
Color Preference:	Flower Guild Package Quote:
FACILITIES INFORMATION:	
☐ Use of Dressing Rooms needed for:	
Number in Wedding Party:	Reception will be held:
If held in the Parish Hall, Catering Comp	pany:
MUSIC INFORMATION (done in consultation w	vith the Canon for Music):
□ Organist Notes:	
□ Quartet/Choir Notes:	
SERVICE PLANNING:	
Officiant:	Homilist (if different):
□ Acolytes:	
Lessons: Old Testament:	
New Testament:	Reader:
Gospel:	Reader:
Prayers:	Reader:
Other:	Reader:
☐ Lay Eucharistic Ministers:	
	□ Wedding Belles: