



Holy Matrimony
Biographical and Contact Information

Note: Please complete as much of this form as possible and bring it to your initial meeting with the clergy.
Revised July 1, 2013

Date and Time of Ceremony: _____

IMPORTANT: DO NOT FINALIZE THIS DATE AND TIME AND INVITE GUESTS WITHOUT CONFIRMATION FROM THE OFFICIANT.

Location of Ceremony: _____

Full Name: _____

By what name do you prefer to be called? _____ Single Divorced Widowed

Street Address: _____

E-Mail Address: _____

Occupation: _____ Employer: _____

Home Phone: _____ Work Phone: _____

Date of Birth: _____ Cell Phone: _____

Date and Church Baptized: _____

Date and Church Confirmed: _____

Of what Church are you currently a member? _____

Father's Full Name: _____

Married to mother Married to someone else Single Divorced Deceased

Mother's Full Name: _____

Married to father Married to someone else Single Divorced Deceased

Full Name: _____

By what name do you prefer to be called? _____ Single Divorced Widowed

Street Address: _____

E-Mail Address: _____

Occupation: _____ Employer: _____

Home Phone: _____ Work Phone: _____

Date of Birth: _____ Cell Phone: _____

Date and Church Baptized: _____

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Of what Church are you currently a member? _____

Father's Full Name: _____

Married to mother Married to someone else Single Divorced Deceased

Mother's Full Name: _____

Married to father Married to someone else Single Divorced Deceased

Anticipated formal names after Marriage _____

Permanent address after Marriage: _____