

MARRIAGE PREPARATION

Date Completed: _____

GROOM: Please remember to print clearly...thank you.

Name: _____ Are you a registered member of St. Peter? Yes or No
Parish: _____ Religion: _____ Age: _____
Phone: _____ Email: _____
Address: _____ City: _____ State: _____ Zip _____
Education: _____
Occupation/Business: _____
Previous Marriage: Yes ____ No ____ Widow(er): Yes ____ No ____ Annulment: Yes ____ No ____
Civil Marriage: When? _____ Where? _____
Have you been Baptized? Yes ____ No ____
Where? _____

BRIDE: Please remember to print clearly...thank you.

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Civil Marriage: When? _____ Where? _____
Have you been Baptized? Yes ____ No ____
Where? _____

A REFUNDABLE DEPOSIT OF \$50.00 IS REQUIRED ALONG WITH THIS FORM TO RESERVE YOUR WEDDING DATE. WEDDING DATES WILL NOT BE APPROVED UNTIL THE COUPLE HAS BEEN INTERVIEWED BY A PRIEST. WEDDINGS ARE HELD ON SATURDAY AT EITHER 11:00AM OR 2:00PM.

Wedding Date Choice: _____ Time: _____

Wedding in: English _____ OR Spanish _____