

**St. Vincent Martyr Church**  
 26 Green Village Rd, Madison, NJ 07940  
 Email to [wedding@svmnj.org](mailto:wedding@svmnj.org)  
 (973)377-4000 ext. 106

View the full wedding guidelines at  
[svmnj.org/wedding-guidelines](http://svmnj.org/wedding-guidelines)

**WEDDING REGISTRATION FORM**

Preferred Celebrant: \_\_\_\_\_

Requested Date of Wedding: \_\_\_\_\_ Time: \_\_\_\_\_

**Second Choice (if preferred date/time is unavailable):**

Requested Date of Wedding: \_\_\_\_\_ Time: \_\_\_\_\_

**Bride's Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ First Marriage: Yes \_\_\_\_\_ No \_\_\_\_\_ Religion: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Home Parish: \_\_\_\_\_ Occupation: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Groom's Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ First Marriage: Yes \_\_\_\_\_ No \_\_\_\_\_ Religion: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Home Parish: \_\_\_\_\_ Occupation: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**WEDDING TYPE**

- Wedding Mass** – Includes the celebration of the Eucharist  
 **Wedding Liturgy** – Without Mass  
 **Convalidation** – For couples already civilly married  
 **Unsure** – Please contact us for guidance

**WEDDING MASS/LITURGY RATES**

	<b>Music Fee</b>	<b>Church Rate</b>	<b>Total</b>
Parishioner <i>Must be a tithing parishioner</i>	\$500	\$1,250	\$1,750*
Non-Parishioner	\$500	\$1,750	\$2,150*

*\*This offering supports the work of the parish and does not go to the priest. It is customary and recommended that the couple make an offering to the priest. **Fees are due at least 30 days from date of wedding.***

**NOTES**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PC	Baptism Certificate	PS
CC	Excel	Folder
Pre-Cana		

**St. Vincent Martyr Church**  
26 Green Village Rd, Madison, NJ 07940  
Administrador [Susan.Paladino@svmnj.org](mailto:Susan.Paladino@svmnj.org)  
(973)377-4000 ext. 106

### PRE-CANA REGISTRATION

Enter your desired Pre-Canva session date. (**View upcoming dates at [svmnj.org/matrimony](http://svmnj.org/matrimony)**):

\_\_\_\_\_

Church where wedding will take place: \_\_\_\_\_

#### **Bride's Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

#### **Groom's Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Please complete the following information for both the Bride and Groom.

	<b>BRIDE</b>	<b>GROOM</b>
Age		
Is this your first marriage?		
Number of Children		
Ages of Children		
Religious Affiliation		
Name of Parish		
Occupation		
Special Interest		

#### **Office Use Only:**

Date of Wedding: \_\_\_\_\_

Notes: