**ST. PAUL THE APOSTLE PARISH**

**MARRIAGE PREP PROGRAM**

**REGISTRATION FORM**

**What is the date of the program would you like to attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GROOM**

Name: (Last) (First)

Nickname for nametag:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (street, town, zip)

Religion

Current Parish name and town

Baptized Yes No Where: Approx. Date:

Confirmed Yes No Where: Approx. Date:

1st Marriage? Yes No (If no, remember to discuss with priest or deacon)

Phone Email:

Please list any food allergies:

**BRIDE**

Name: (Last) (First)

Nickname for nametag:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (street, town, zip)

Religion

Current Parish name and town

Baptized Yes No Where: Approx. Date:

Confirmed Yes No Where: Approx. Date:

1st Marriage? Yes No (If no, remember to discuss with priest or deacon)

Phone Email:

Please list any food allergies:

**CEREMONY**

Church name and town:

Priest or Deacon presiding at wedding

Date/Time

Rehearsal Date/Time

(Office use only)

Date application received: \_\_\_\_\_\_\_\_\_\_\_\_ Amount received: \_\_\_\_\_\_\_\_\_

Method of payment \_\_\_\_\_cash \_\_\_\_\_check # \_\_\_\_\_ online