

St. Robert's Church

PRIEST/DEACON: _____ DATE: _____

INFORMATION FOR MARRIAGE

Name of Bride _____ Age _____

Address _____ Home Phone _____
_____ Work Phone _____
Email: _____ Cell # _____

Catholic: Yes No Previous Marriage: Yes No
What Church do you attend? _____

Name of Groom _____ Age _____

Address _____ Home Phone _____
_____ Work Phone _____
Email: _____ Cell # _____

Catholic: Yes No Previous Marriage: Yes No
What Church do you attend? _____

Proposed Place of Marriage _____
Date _____ Time _____ On Calendar: Yes No
Nuptual Mass _____ Simple Ceremony _____
Rehearsal Date _____ Time _____
Celebrant: Fr. _____
Initial Interview with Fr. _____ Date _____

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	Bride		Groom
Document Envelope Started		_____	
A Form	_____		_____
B Form	_____		_____
Baptismal Certificates	_____		_____
Dispensation(s), Permission(s) Obtained	_____		_____
Annulment	_____		_____
Premarriage Testing		_____	
Parish Marriage Preparation		_____	
(Additional) Counseling Completed		_____	
Ceremony Options Chosen		_____	

Comments: