

Wedding Reservation Form

To assist us in planning your wedding ceremony, please provide the following information:

BRIDE
NAME:
ADDRESS:
TELEPHONE:
MOBILE PHONE:
E-MAIL:
DATE OF BIRTH:
FATHER'S NAME:
MOTHER'S NAME:
PERSONAL INFORMATION <input type="checkbox"/> Baptized (Denomination: _____) <input type="checkbox"/> Active church member <input type="checkbox"/> Related to active church member (Name: _____) <input type="checkbox"/> Never Married <input type="checkbox"/> Married Previously–Widowed <input type="checkbox"/> Married Previously–Divorced–Date(s) of Dissolution: _____

GROOM
NAME:
ADDRESS:
TELEPHONE:
MOBILE PHONE:
E-MAIL:
DATE OF BIRTH:
FATHER'S NAME:
MOTHER'S NAME:
PERSONAL INFORMATION <input type="checkbox"/> Baptized (Denomination: _____) <input type="checkbox"/> Active church member <input type="checkbox"/> Related to active church member (Name: _____) <input type="checkbox"/> Never Married <input type="checkbox"/> Married Previously–Widowed <input type="checkbox"/> Married Previously–Divorced–Date(s) of Dissolution: _____

