



## WEDDING INQUIRY FORM

### PROPOSED WEDDING DETAILS

Date of Wedding \_\_\_\_\_ Time of Wedding \_\_\_\_\_

Place of Wedding \_\_\_\_\_

Type of Wedding

Wedding Ceremony

Nuptial Mass

Particular Details	BRIDE	GROOM
<i>Name</i>		
<i>Date of Birth</i>		
<i>Address</i>		
<i>Parish</i>		
<i>Archdiocese/Diocese</i>		
<i>Phone: Home</i>		
<i>Phone: Work</i>		
<i>Mobile Number</i>		
<i>Email address</i>		
Sacrament Details		
<i>Religion</i>		
<i>Confirmation</i>		
<i>First Marriage</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If <b>NO</b>: how many times have you been married?</i>		
<i>If <b>NO</b>: has this marriage been annulled by the Catholic Church Tribunal?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

### PARTICULAR QUESTIONS:

Have you booked your wedding with another church or venue?

Yes

No

Do you intend to bring your own priest to officiate at your wedding?

Yes

No

FOR PARISH USE ONLY	Application No:	NOTES
DATE OF APPLICATION		
APPLICATION RECEIVED BY		