

YOUR CHURCH Wedding Request

Full Name of Bride: _____
Age: _____ Employer: _____
Home Phone: _____ Work Phone: _____ Okay to call at work? Yes ___ No ___
Other Phone (specify): _____
Email Address: _____
Current Address: _____
City/State/Zip: _____

Full Name of Groom: _____
Age: _____ Employer: _____
Home Phone: _____ Work Phone: _____ Okay to call at work? Yes ___ No ___
Other Phone (specify): _____
Email Address: _____
Current Address: _____
City/State/Zip: _____

Has either the bride or groom attended CCV for at least 6 months? _____
Has the bride been baptized by immersion? _____ By whom? _____ Date? _____
Has the groom been baptized by immersion? _____ By whom? _____ Date? _____

Is there any other information about yourselves or your wedding situation you think might be helpful to provide?

Desired date and time of wedding ceremony: _____
Location of wedding: _____
Address of wedding location: _____
Number of people expected at wedding: _____
Desired rehearsal date and time: _____

Send Completed Form To:
YOUR CHURCH
Attn: Outreach Pastor
123 Any Road
Any City, Any State 12345

For YOUR CHURCH Office Use Only

Date Data Sheet Received _____
Assigned Staff Member Date/Name _____
Pre-Marital Counseling Completed _____
Rehearsal Date/Time _____
Wedding Date/Time _____