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ARMENIAN APOSTOLIC CHURCH OF COLORADO

Rev. Father Yeremia Khachatryan – Parish Priest

APPLICATION FOR HOLY MATRIMONY

(Please type or print. Return completed application to armchurchdenver@gmail.com)

For Office Use only:

License # _____

Certificate # _____

Wedding Date _____/_____/_____

Time _____

GROOM'S INFORMATION: 1. Full Name _____ DOB _____/_____/_____

2. Address _____ City _____ State _____ Zip _____

3. Email _____ Primary Phone Number _____

4. Groom's Baptized Denomination _____ Year _____ Church _____

5. If not baptized or confirmed, the following date is suggested for baptism and/or confirmation in the Armenian Church.

(services are held 2nd Sunday per Month) Date _____/_____/_____ Time _____

6. Marital status (select one) ☐ Never Married; ☐ Widower; ☐ Divorced

7. Father's Name _____ Mother's Maiden Name _____

BRIDE'S INFORMATION: 8. Full Name _____ DOB _____/_____/_____

9. Address _____ City _____ State _____ Zip _____

10 Email _____ Primary Phone Number _____

11. Bride's Baptized Denomination _____ Year _____ Church _____

12. If not baptized or confirmed, the following date is suggested for baptism and/or confirmation in the Armenian Church.

(services are held 2nd Sunday per Month) Date _____/_____/_____ Time _____

13. Marital status (select one) ☐ Never Married; ☐ Widower; ☐ Divorced

14. Father's Name _____ Mother's Maiden Name _____

15. Best Man's Full Name _____ Contact # _____

(The best man must be a Christian)

17. Maid of Honor's Full Name _____ Contact # _____

For Questions, please contact Caroline Younit (303) 917 - 0972
www.coloradoarmenianchurch.com | armchurchdenver@gmail.com

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19. Consultation with the Parish Priest Date ____/____/____ Time ____

20. Location of Wedding Ceremony:

☐ St. Catherine Greek Orthodox Church; ☐ Sanctuary Only ☐ Sanctuary + Hall

☐ Other location requested (*only with Priest's approval*) _____

Address _____

21. Wedding Rehearsal Date ____/____/____ Time ____

22. Officiating Clergy: ☐ Rev. Father Yeremia Khachatryan; ☐ Other Clergy (*only with Priest's approval - list name below*)

23. Language of service: ☐ Armenian; ☐ Russian; ☐ English _____

24. Location of reception _____ 25. Number of guests _____

26. Address of the newlyweds after the wedding:

Street _____ City _____ State _____ Zip _____

DONATIONS FOR HOLY MATRIMONY

(Donations have been suggested and approved by Parish Council 2014)

Church Service	\$800	
Total	\$800	

To secure Wedding Ceremony service date, please pay full amount to treasurer on date of application submission. Please note; for services held outside of normal church service dates, additional fees will apply such as: admin fee, church rental, air travel & hotel reservation for our father.

Name: _____ Date: _____

Signature: _____

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