

# APPLICATION FOR WEDDING

Name of Bridegroom: .....

Address: .....

.....

Phone: .....

email: .....

Date of Birth: .....

Occupation: .....

Baptised: Yes  No  Previously Married: Yes  No

Children from previous marriage or relationship: Yes  No \*

Name of Bride: .....

Address: .....

.....

Phone: .....

email: .....

Date of Birth: .....

Occupation: .....

Baptised: Yes  No  Previously Married: Yes  No

Children from previous marriage or relationship: Yes  No \*

Living together: Yes  No \* If yes, how long: .....

Children from this relationship: Yes  No \*

Proposed date of Wedding: .....

Proposed time of Wedding: .....

Proposed place of Wedding: .....

\* *These questions help identify the most appropriate marriage preparation programme to use for you*

*Please return to:*

St Stephens Anglican Church 42 Regent Street BELMONT VIC 3216 or  
ststephensang2@iinet.net.au