



Day and Date of Ceremony	Time
Day and Date of Rehearsal	Time
Officiant(s)	() Church or () Chapel
Full Name First Middle Last	Groom Full Name First Middle Last
"Goes By"	"Goes By"
Age Date of Birth	Age Date of Birth
Place of Birth () Widow () Divorced	Place of Birth () Bachelor () Widower () Divorced
Address	Address
CityStateZip	CityStateZip
Phone: Home Office Cell	Phone: HomeOffice
Email:	CellEmail:
Member of St.John the Divine?	Member of St.John the Divine?
If no, list church affiliation() Baptized () Confirmed	If no, list church affiliation() Baptized () Confirmed
Father's Name	Father's Name
First Middle Last () Natural () Step () Deceased	First Middle Last () Natural () Step () Deceased
Mother's NameFirst Middle Maiden	Mother's Name
() Natural () Step () Deceased	First Middle Maiden () Natural () Step () Deceased
Address	Address
CityStateZip	CityStateZip
Phone() both parent's address () mother's () father's	Phone() both parent's address () mother's () father's
Maid/Matron of Honor	Best Man
Bridesmaids	Groomsmen
Flower Girl	Ring Bearer

Wedding Information (continued)

Estimated Number of Guests attending the weddi	ng
Holy Eucharist (Yes or No)	
Mothers, Step-mothers, and Grandmothers to be s	seated before the Processional (please list)
Bride's Side:	Groom's Side
Father's Mother	Father's Mother
Mother's Mother	Mother's Mother
Other	Other
Mother	Mother
Please list who will be escorting the Bride: () Father	() Other
Please list who will be escorting Mothers and Gra Bride's Mother	
Brides Grandmother	Groom's Grandmother
Music () Organist () Soloist () In	astrumentalist () Carillon
Decorations	
Name of Florist	Phone
Candelabra () Aisle () Seven Branch	
Photographer	Phone
Reception Location	
Rehearsal Dinner Location	
Permanent Address after Marriage	
Street Address	
CityState_	Zip
Home Phone	Email
Will you attend St. John the Divine?	