

St. Philip's Episcopal Church

Directions: Please complete Section 1 and return to the church office. Please print clearly.

Section 1: Application for Holy Matrimony

Date of Application: _____

Bride's Full Name _____

Address: _____

E-mail: _____ Occupation _____

Home Telephone: _____ Cell: _____

Bachelor or Widower: _____

Number of this Marriage: _____

Baptized: _____ In What Denomination: _____

Confirmed: _____ In What Denomination: _____

Communicant: _____ In What Denomination: _____

Age: _____ Date of Birth: _____
Month Day Year

Place of Birth: _____
City State Country

Father's Name: _____

Mother's Maiden Name: _____

Parents'
Residence: _____

Groom's Full Name _____

Address: _____

E-Mail _____ Occupation _____

Home Telephone: _____ Cell: _____

Maiden or Widower: _____

Number of this Marriage: _____

Baptized: _____ In What Denomination: _____

Confirmed: _____ In What Denomination: _____

Communicant: _____ In What Denomination: _____

Age: _____ Date of Birth: _____
Month Day Year

Place of Birth: _____
City State Country

Father's Name: _____

Mother's Maiden Name: _____

Parents' Address: _____

Section 2: Marriage Service Information

(to be completed by St. Philip's clergy)

License No. _____ Where Issued: _____

Date of Ceremony: _____ Hour: _____

Place of Ceremony: Church: _____ Chapel: _____ Residence: _____

Holy Communion: _____ Organist: _____ Choir: _____

Rehearsal: _____ Flowers: _____ Fees: _____

Names of Witnesses: 1. _____

2. _____

Permanent Address after Marriage: _____

Officiant: _____