

# Wedding Information

To secure the date and time of your wedding, please submit completed form to the church office as soon as possible.

FOR OFFICE USE:	
Calendar	
Occupied	
Doors	

Groom	
Name (First Middle Last)	
Member of St. John's? <input type="checkbox"/> Yes <input type="checkbox"/> No	If a member, will you continue to attend St. John's after your marriage? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone	Date of Birth
Current Residence	
Bride	
Name (First Middle Last)	
Bride's Name post wedding	
Member of St. John's? <input type="checkbox"/> Yes <input type="checkbox"/> No	If a member, will you continue to attend St. John's after your marriage? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone	Date of Birth
Current Residence	
Residence after marriage	
Ceremony	
Date/Time Ceremony	
Date/Time of Rehearsal	
Approximate count of attendees at wedding	
Officiate	
Attendants	
Dressing at church	Groom: <input type="checkbox"/> Yes <input type="checkbox"/> No      Bride: <input type="checkbox"/> Yes <input type="checkbox"/> No
Contact Information (best way to reach you with questions about your wedding - email/phone):	
Other Information:	