

St. Peter's Episcopal Church Wedding Information Form

Bride's Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City/County* *State* *ZIP Code*

Home Phone: _____ Email Address: _____

Father's Name: _____ Living or Deceased? (circle)

Mother's Name: _____ Living or Deceased? (circle)

Birth Date: _____ Marital Status: _____
Never Married *Widowed* *Divorced* *No. of times married*

Bride's Church
Affiliation & Location: _____

Occupation: _____ Preferred Name for
Ceremony: _____

Groom's Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City/County* *State* *ZIP Code*

Home Phone: _____ Email Address: _____

Father's Name: _____ Living or Deceased? (circle)

Mother's Name: _____ Living or Deceased? (circle)

Birth Date: _____ Marital Status: _____
Never Married *Widowed* *Divorced* *No. of times married*

Groom's Church
Affiliation & Location: _____

Occupation: _____ Preferred Name for
Ceremony: _____

Participating Clergy: _____ Organist: _____

Rehearsal Date/Time: _____ Musicians: _____

Wedding Date/Time: _____ Rings: Two Rings() Bride Only()

For Office use only. Email notifications sent
Musician___ Altar Guild___ Wedding Guild___