

Celebration Lutheran Church

MARRIAGE INFORMATION FORM

Date of Wedding _____ Time _____ Place _____

Date of Rehearsal _____ Time _____

GROOM _____ Birthdate _____

Single _____ Divorced _____ Widower _____

Address _____
Street _____ City _____ Zip _____

Phone _____

BRIDE _____ Birthdate _____

Single _____ Divorced _____ Widower _____

Address _____
Street _____ City _____ Zip _____

Phone _____

WITNESSES _____

Other members of the wedding party:

Groomsmen _____ Bridesmaids _____

Ushers: _____

Ringbearer _____ Flower girl _____

Other arrangements:

Single ring _____ Double ring _____ Sanctuary _____

Father will _____ will not _____ give away bride Organist _____

Soloist _____

Fellowship Room _____

Number of guests attending: under 150 _____ 150+ _____ 200+ _____

Additional information:

For OFFICE USE only:

Conference Dates: _____ Time _____

License Number _____ County _____