

DIVINE PROVIDENCE CHURCH
MARRIAGE PREPARATION REGISTRATION FORM

This form facilitates the initial meeting with the priest. Submit this form to the parish office with your information.
The priest then will contact you to schedule a meeting. Thank you so much!

Bridegroom's Name: _____

Date of Birth: _____ Place of Birth: _____

Address: _____ City/State: _____

Father's Name: _____

Mother's Name: _____

Address: _____ City/State: _____

Telephone:

(Home) _____ (Cell) _____ (Wk) _____

Employment/Occupation: _____

Bride's Full Maiden Name: _____

Date of Birth: _____ Place of Birth: _____

Address: _____ City/State: _____

Father's Name: _____

Mother's Name: _____

Address: _____ City/State: _____

Telephone:

(Home) _____ (Cell) _____ (Wk) _____

Employment/Occupation: _____

(For Church's Official Use)

Marriage Preparation Class Dates: _____

Follow-Up Dates: _____

Initial Meeting Date: _____