



Wedding Registration

Today's Date: _____

Groom

Name: _____

Age: _____

Address: _____

City: _____

State, Zip: _____

Phone: _____

Email: _____

Catholic: _____

Baptized non-Catholic: _____

Not Baptized: _____

Previous Marriage? Yes: _____ No: _____

Bride

Name: _____

Age: _____

Address: _____

City: _____

State, Zip: _____

Phone: _____

Email: _____

Catholic: _____

Baptized non-Catholic: _____

Not Baptized: _____

Previous Marriage? Yes: _____ No: _____

Proposed Wedding Date & Time : _____

Has the bride, groom, or their immediate family been registered member of St. Edward the Confessor Church or San Felipe de Jesus for at least six months? Yes: _____ No: _____

Name of registered family member: _____

I prefer: English Spanish Bilingual(English/Spanish)

Please turn this form into the Parish Office or email to weddings@stedward.com