



## 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: \_\_\_\_\_

Please turn this form into the Parish Office or email to [weddings@stedward.com](mailto:weddings@stedward.com)