

APPLICATION FOR MARRIAGE CEREMONY
The Moorings Presbyterian Church

791 Harbour Drive - Naples, Florida 34103
Phone, (239) 261-1487; FAX, (239) 261-8740

(Please PRINT and complete information on both sides)

GROOM

BRIDE

NAME _____
First Middle Last Age

NAME _____
First Middle Last Age

Address _____

Address _____

Phone: (Home) _____ (Work) _____

Phone: (Home) _____ (Work) _____

Occupation _____

Occupation _____

Religious Denomination _____

Religious Denomination _____

Baptized ___ Confirmed ___ Communicant ___

Baptized ___ Confirmed ___ Communicant ___

Present Church _____

Present Church _____

Previous Church _____

Previous Church _____

Number of previous marriages, if any _____

Number of previous marriages, if any _____

Terminated by:
Annulment ___ Divorce ___ Death of Spouse ___

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Annulment ___ Divorce ___ Death of Spouse ___

If divorce, what were the circumstances and date of the last dissolution?

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Names and ages of children from previous marriage(s):

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WEDDING DATE _____	TIME _____	REHEARSAL DATE _____	TIME _____
SANCTUARY ___ CHAPEL ___ HOME ___ OTHER ___	OFFICIANT _____		
TYPE OF CEREMONY: Double Ring ___ Single Ring ___	ORGANIST _____		
CONFERENCE DATES (with Minister) _____			

Do you plan to have a guest minister? Yes ___ No ___

If yes, has the minister agreed to officiate? Yes ___ No ___

Minister's name _____

Church affiliation _____

Church address and phone number: _____
