

DIOCESE OF NELSON

MARRIAGE PREPARATION INFORMATION

NAME: _____

ADDRESS: _____

POSTAL CODE: _____

TELEPHONE: _____

EMAIL: _____

Religion: _____

Current Church: _____

Have you been married before?

Yes _____ No _____

NAME: _____

ADDRESS: _____

POSTAL CODE: _____

TELEPHONE: _____

EMAIL: _____

Religion: _____

Current Church: _____

Have you been married before?

Yes _____ No _____

DATE AND PLACE OF MARRIAGE: _____

(For Office use)

MARRIAGE PREPARATION COURSE ATTENDED:

Date: _____ Place: _____

Facilitator (sign and print name): _____

Paid: _____ Cheque # _____