

## LITURGICAL & PAROCHIAL REGISTER INFORMATION FOR WEDDINGS

Clergy's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Rehearsal Date and Time: \_\_\_\_\_

Wedding Date and Time \_\_\_\_\_

### ***Personal Information:***

(For the Parish Register)

Full Name: \_\_\_\_\_

(First, middle, last)

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

& City

Divorced? \_\_\_\_\_ Widowed? \_\_\_\_\_

Baptized? \_\_\_\_\_ Confirmed? \_\_\_\_\_ Communicant? \_\_\_\_\_

Church Baptized? \_\_\_\_\_

Church Confirmed? \_\_\_\_\_

Other Religious Background? \_\_\_\_\_

\_\_\_\_\_

Parent's Full Names (Please print):

(First, middle, last and **maiden** name where applicable)

Parent: \_\_\_\_\_

City of Residence: \_\_\_\_\_

Parent: \_\_\_\_\_

City of Residence: \_\_\_\_\_

### ***Personal Information:***

(For the Parish Register)

Full Name: \_\_\_\_\_

(First, middle, last)

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

& City

Divorced? \_\_\_\_\_ Widowed? \_\_\_\_\_

Baptized? \_\_\_\_\_ Confirmed? \_\_\_\_\_ Communicant? \_\_\_\_\_

Church Baptized? \_\_\_\_\_

Church Confirmed? \_\_\_\_\_

Other Religious Background? \_\_\_\_\_

\_\_\_\_\_

Parent's Full Names (Please print):

(First, middle, last and **maiden** name where applicable)

Parent: \_\_\_\_\_

City of Residence: \_\_\_\_\_

Parent: \_\_\_\_\_

City of Residence: \_\_\_\_\_

# Bulletin Components

## *The Wedding Party*

Attendants for \_\_\_\_\_: (In order of appearance)

Attendants for \_\_\_\_\_: (In order of appearance)

---

---

---

---

---

---

---

---

---

---

(Primary Attendant:)

(Primary Attendant:)

Flower Attendant: \_\_\_\_\_

Ring Bearer: \_\_\_\_\_

Ushers: \_\_\_\_\_

### *Liturgical/Altar Guild Notes*

Readings: \_\_\_\_\_

Readers' Names: \_\_\_\_\_

Acolytes' Names: \_\_\_\_\_

Eucharist \_\_\_\_\_ Non-Eucharist \_\_\_\_\_ Number of guests: \_\_\_\_\_

If Eucharist, Eucharistic Minister's Name: \_\_\_\_\_

Florist: \_\_\_\_\_ Delivery Time: \_\_\_\_\_ (At least 2 hours in advance.)

(1 arrangement in front of Altar will be used for Sunday; may also have 3 arrangements on back altar that can be taken after wedding or donated to church to be taken to shut-ins or those hospitalized.)

The Altar Guild furnishes:

Candelabra (2): \_\_\_\_\_ Aisle Candles (20): \_\_\_\_\_ White Bows for center aisle (20): \_\_\_\_\_ Kneeling Cushion: \_\_\_\_\_

Photos will be taken:

Photographer's Name: \_\_\_\_\_

\_\_\_\_\_ at church before the wedding\*

Photographer's Phone: \_\_\_\_\_

\_\_\_\_\_ at church after the wedding

Photographer's email: \_\_\_\_\_

\_\_\_\_\_ Not at Church

Will the couple dress at church?\*: \_\_\_\_\_ Arrival Time(s): \_\_\_\_\_

Will members of the Wedding Party dress at church?: \_\_\_\_\_ Time: \_\_\_\_\_

**\* All participants should be done posing for photographs and dressing at least 30 minutes before the wedding is scheduled to begin.**

Will there be a receiving line? \_\_\_\_\_

Will the reception be at Church? \_\_\_\_\_ If yes, at what time? \_\_\_\_\_ # of guests: \_\_\_\_\_

How many pews should be reserved for Family? \_\_\_\_\_

Names of those who will be seated in reserved pews:

Family #1: \_\_\_\_\_

Family #2: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Special Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Mary Chapman, Music Director – [mchapman@holycommunion.net](mailto:mchapman@holycommunion.net) or 314-721-7401, ext. 350  
Cheyanne Lovellette, Director of Operations – 314-721-7401, ext. 301

**Your wedding license must be received in the parish office the Tuesday before your wedding.**

**All fees are due at the time of the rehearsal.**

**\$200 fee is due when wedding date is confirmed.**

**50% of balance is due 90 days before the wedding.**