

**Wedding Interview Information Form**  
*To be completed and returned to the Marriage Coordinator*  
**Holy Matrimony**

**Groom's Full Name** \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (home) \_\_\_\_\_ (office) \_\_\_\_\_

Email \_\_\_\_\_

Bachelor or Widower \_\_\_\_\_ Number of this marriage \_\_\_\_\_

Occupation \_\_\_\_\_

Baptized: Yes / No Denomination \_\_\_\_\_

Confirmed: Yes / No Denomination \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of birth (city, state) \_\_\_\_\_

Father's name \_\_\_\_\_

Mother's name (include maiden name) \_\_\_\_\_

**Bride's Full Name** \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (home) \_\_\_\_\_ (office) \_\_\_\_\_

Email \_\_\_\_\_

Bachelor or Widower \_\_\_\_\_ Number of this marriage \_\_\_\_\_

Occupation \_\_\_\_\_

Baptized: Yes / No Denomination \_\_\_\_\_

Confirmed: Yes / No Denomination \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of birth (city, state) \_\_\_\_\_

Father's name \_\_\_\_\_

Mother's name (include maiden name) \_\_\_\_\_

**Date of Ceremony** \_\_\_\_\_ Hour \_\_\_\_\_

Names of witnesses 1. \_\_\_\_\_

2. \_\_\_\_\_

**Date of rehearsal** \_\_\_\_\_ Hour \_\_\_\_\_

Permanent address after marriage \_\_\_\_\_

\_\_\_\_\_