

MARRIAGE APPLICATION

Groom's name: _____
Address: _____
City/Zip: _____
Phone (indicate best # to reach you):
(W) w/area code: _____
(H) w/area code: _____
(Cell) w/area code: _____
Email: _____
Married before: Yes No
 Member Non-member Worship at Faith
Church background: _____

Bride's name: _____
Address: _____
City/Zip: _____
Phone (indicate best # to reach you):
(W) w/area code: _____
(H) w/area code: _____
(Cell) w/area code: _____
Email: _____
Married before: Yes No
 Member Non-member Worship at Faith
Church background: _____

Marriage Ministry Commitment

We have read through the "Preparing For Marriage" brochure and commit to the following:

Future
Husband

Future
Wife

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I am committed to weekly worship at Faith Lutheran Church. |
| <input type="checkbox"/> | <input type="checkbox"/> | I believe that Jesus Christ is the Forgiver of my sins and the Leader of my life. |
| <input type="checkbox"/> | <input type="checkbox"/> | I am committed to living according to God's standards and abstain from physical intimacy before marriage. |
| <input type="checkbox"/> | <input type="checkbox"/> | I am committed to the "2=1 Class" for Engaged Couples.
I am planning to attend in the Fall _____ Spring _____ (check one) |
| <input type="checkbox"/> | <input type="checkbox"/> | I am committed to the "3 Solas" class (if not a member of FLC).
I am planning to attend in the Fall _____ Winter _____ Spring _____ (check one) |
| <input type="checkbox"/> | <input type="checkbox"/> | I am committed to taking the "Taylor-Johnson Temperament Analysis". |
| <input type="checkbox"/> | <input type="checkbox"/> | I understand the fees involved in a wedding at Faith Lutheran Church. |

SIGNED: _____ (future husband)

_____ (future wife)

Wedding date requested: _____ Rehearsal date: _____
Time: _____ Time: _____

OFFICE USE ONLY: Meeting _____ "3 Solas" Class _____
 "2=1 Class" _____ Coordinator _____
 Packet sent _____ Pastoral meeting _____

RETURN THIS FORM TO: Faith Lutheran Church, 37635 Dequindre, Troy, MI 48083