Pastor____ W. C.___ Calendar___

PENINSULA COMMUNITY CHURCH REQUEST FOR MARRIAGE

REQUESTED WEDDING DATE:	Time:
Bride:	Groom:
Address:	Address:
Email:	Email:
PHONE: WORK:	Phone: Work:
Can you receive calls at work:YesNo	Can you receive calls at work:YesNo
Age/Birthday:	Age/Birthday:
PARENT'S CONSENT:YESNO	PARENT'S CONSENT:YESNO
Expected number of Guests:	Location of Reception:
Will you use the Senior Pastor at Peninsula Communit	Y ChurchYesNo
If not, who would you request? Name	Phone#
Will you agree to attend premarital counseling with the \mathbf{W}	HE PASTOR OR A STAFF MEMBER FOR AT LEAST THREE SESSIONS BEFORE
THE WEDDING? BRIDE:YESNO	Groom:YesNo
WILL YOU COMPLETE ASSIGNMENTS AS REQUESTED?	
Bride:YesNo	Groom:YesNo
Are you a Christian?	
Bride:YesNo Not Sure	Groom:YesNoNot Sure
If yes, how did you become a Christian?	
Bride:	Groom:
Do you attend church?YesNo	Do you attend church?YesNo
If so, which one?	How often?
How long have you dated?	How long have you been engaged?
(Bride) Are you pregnant?YesNo	Have you been living together?YesNo
What is your previous marriage experience?	
Bride:	Groom:
If there has been a divorce, what has been done to pursu	JE RECONCILIATION WITH PREVIOUS SPOUSE?
Bride:	Groom: