

**LELAND COMMUNITY UNITED METHODIST CHURCH
CHURCH WEDDING APPLICATION FORM**

1. Date of wedding (month, day, year): _____
2. Place and Time of Wedding Service: _____
3. Place and Time of Wedding Reception (if other than Leland Community UMC):

BRIDE:

4. All given names: _____
5. Marital status: _____ never married, widowed, or divorced
_____ divorced
If divorced, give date when the divorce was finalized: _____
6. Religious affiliation: _____
7. Birth date (month, day, year): _____
8. Age on wedding day: _____
9. City, town, state/province or country of birth: _____
10. Current address (before marriage): _____
11. Home telephone: _____
Work telephone: _____
12. E-Mail Address: _____
13. Father's name: _____
14. Mother's name: _____

GROOM:

15. All given names: _____
16. Marital status: _____ never married, widowed, or divorced
_____ divorced:
If divorced, give date when the divorce was finalized: _____
17. Religious affiliation: _____
18. Birth date (month, day, year): _____
19. Age on wedding day: _____
20. City, town, state/province or country of birth: _____
21. Current address (before marriage): _____
22. Home telephone: _____
Work telephone: _____
23. E-Mail address: _____
24. Father's name: _____
25. Mother's name: _____

OTHER GENERAL INFORMATION:

26. Officiating minister: _____
27. Suitable premarital counseling days/times: _____
28. Address after wedding: _____
29. Full Name of Maid of Honor: _____
30. Full Name of Best Man: _____