

O.L.R. WEDDING REQUEST FORM

Date of Request: _____

DAY, DATE, & TIME OF WEDDING: _____

Are the Bride and Groom Catholic (Y or N): Bride _____ Groom _____

BRIDE:

Name:

Address:

E-mail:

Phone:

GROOM:

Name:

Address:

E-mail:

Phone:

CATHOLIC PARISH:

CATHOLIC PARISH:

IF OUT OF TOWN - Local phone and name
of person to contact (Relation)

Name:

Relation:

Phone:

IF OUT OF TOWN - Local phone and name
of person to contact (Relation)

Name:

Relation:

Phone:

(To confirm your wedding date, the following information is required):

Priest/Deacon preparing couple for this wedding:

PRESIDING PRIEST/DEACON: Church: _____
Address: _____
Phone: _____

OFFICE COMPLETES FOLLOWING INFORMATION:

DATE DELEGATION GRANTED: _____

Pastor's approval (Y or N):
Signed Policy Received:

Date Wedding Policy Mailed:
Confirmed (*oral, writing, in person*)

FOR OUT OF PARISH ONLY: Permission needed from bride's parish priest to be married @ Our Lady of the Rosary.

Deposit received:	Amount	date	Initial
Balance of Fees Paid:	Amount	date	Initial

REHEARSAL DATE /TIME:

WEDDING COORDINATORS ASSIGNED:

Email: office@ourladyoftherosary-no.com / Phone: 488-2659 / Fax: 488-6741
Office Hours: Monday – Friday (9:00am to 2:00pm)