



St. Francis of Assisi

Catholic Church - Triangle, VA

Wedding Inquiry Form

Groom's Information

First Name: _____

Last Name: _____

Cell No: (____) _____ - _____

Email: _____ @ _____

Address: _____

City State Zip

Religion: Catholic Christian Other

Baptized: Yes No

Confirmed: Yes No

Parish: St. Francis _____

Already registered? Yes No

Your first marriage? Yes No

If no, please explain in the section below

Bride's Information

First Name: _____

Last Name: _____

Cell No: (____) _____ - _____

Email: _____ @ _____

Address: _____

City State Zip

Religion: Catholic Christian Other

Baptized: Yes No

Confirmed: Yes No

Parish: St. Francis _____

Already registered? Yes No

Your first marriage? Yes No

If no, please explain in the section below

Hoped for Wedding Date and Time

Saturday at 2:00 pm on _____, 20__

Another day of the week (*this will need to be discussed with the parish*)

Marriage Preparation with St. Francis Another parish: _____

Wedding Ceremony at St. Francis Another parish: _____

Do you plan to invite a priest or deacon to celebrate with you, not from St. Francis? Yes No

Additional Information you wish to provide: