

The Benefice of Peasedown St John with Wellow

The Parish of Wellow

Wedding Application

PLEASE COMPLETE THIS FORM IN CAPITALS & RETURN

Your chosen wedding date
Your chosen Church

TIME DAY DATE MONTH YEAR
St Julian's Parish Church, Wellow

MAN

WOMAN

Your full first names
Your surname

.....
.....

Your age on your wedding day

.....

Your marital state (please circle one)

No previous marriage or Civil Partnership	No previous marriage or Civil Partnership
Divorced	Divorced
Previous civil partnership dissolved	Previous civil partnership dissolved
Previous civil partnership annulled	Previous civil partnership annulled
Widowed	Widowed
Surviving civil partner	Surviving civil partner

Your profession
Your full address

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.....
.....

Your father's full name
Your father's occupation
(state if 'retired' or 'deceased')

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.....

Your nationality
Your parish church
Your telephone number
Your e-mail address

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I hereby certify that to the best of my belief the answers to the above questions are correct, that I know of no reason in law why I may not marry, and that I am willing to participate in the Marriage Preparation.

Your Signature

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