Hartland Coast Mission Community

WEDDING ENQUIRY FORM

Choice of Church if available: Qualifying Connection: Preferred Wedding date Preferred time: possible alternative, if above not available		
	GROOM	**BRIDE**
First Name(s)		
Surname		
Address		
Phone number		
Home Parish Church		
Email		
Date of birth		
Occupation		
Previous marriages or Civil Partnerships		
Nationality – you will need to produce your birth certificate or a current passport		

Are you related to one another? If so, how?

Do you have any children? If so, please give their names and ages.

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for office use

Date of enquiry

Response

sent