



OUR LADY OF PERPETUAL HELP ST. MARY'S CATHOLIC CHURCH

www.stmarysalbany.com

MARRIAGE PREPARATION – GENERAL INFORMATION FORM

BRIDE's Name: _____ Date of Birth _____

Address: _____

City: _____ Zip _____

Phone: _____ Email: _____

Have you been baptized? _____ Religion _____

Are you married? _____ In the Church? _____ Civilly? _____

Have you ever been married before? _____ In the Church? _____ Civilly? _____

Has any previous marriage been annulled? _____

What parish are you registered at (Name & City/State)? _____

GROOM's Name: _____ Date of Birth _____

Address: _____

City: _____ Zip _____

Phone: _____ Email: _____

Have you been baptized? _____ Religion _____

Are you married? _____ In the Church? _____ Civilly? _____

Have you ever been married before? _____ In the Church? _____ Civilly? _____

Has any previous marriage been annulled? _____

What parish are you registered at (Name & City/State)? _____

Requested Wedding date: _____

For Office Use

Note/s:

815 BROADALBIN ST. SW ALBANY OREGON 97321—2469

TEL.NO. (541) 926-1449 Non-Profit EIN: 93-0415218 FAX NO. (541) 926-2191