

MARLOW AREA TEAM MINISTRY - MARRIAGE APPLICATION

Full name (surname in block capitals)	Age at proposed date of wedding	Marital status	Rank/profession or occupation	Address	Father's full name (if deceased, add 'deceased')	Father's occupation before retirement; if retired, add 'retired'
m.		(1) Single <input type="checkbox"/>				
		(2) Widowed <input type="checkbox"/>		post code		
		(3) Divorced <input type="checkbox"/>		Phone #		
		If (3) Have you been divorced more than once Yes?No Date Decree Absolute obtained				
		e-mail				
f		(1) Single <input type="checkbox"/>				
		(2) Widowed <input type="checkbox"/>		post code		
		(3) Divorced <input type="checkbox"/>		Phone #		
		If (3) Have you been divorced more than once Yes?No Date Decree Absolute obtained				
		e-mail				
Nationality	Date of Birth	*Name of your local church at the above address	Are you a member of that or a different church?	Why do you wish to be married in the Marlow Area Team Ministry? Have you any connection with the church you have chosen?		
m						
f		*required for the calling of your banns				
At which church do you wish to be married?		On what date?	At what time?	Alternative date & time	Tick if you would like any of the following: (please check for charges) Organ <input type="checkbox"/> Choir (if available) <input type="checkbox"/> Bells (if available) <input type="checkbox"/> Video in church <input type="checkbox"/>	
Signature 1		Date	Signature 2		Date	
					Where do you expect to live after the service?	
Please note that this application does not guarantee a booking We cannot guarantee the date or time requested. They will be confirmed once the application is considered				Officiating priest	Date for first reading of banns	
Please return the completed form by post or via e-mail to parishoffice.marlowteam@btinternet.com			Date received:	Date & time agreed		Marriage preparation: