

Wedding Information Sheet

St. Martin's Episcopal Church

The information requested will help the church staff with preparation for your wedding ceremony. Please answer all questions, indicating those which do not apply with **N/A**.

Please return the completed form to the church office by **email** (office@smartinswmbg.org), **fax** (757-229-1797) or **mail** to our street address (1333 Jamestown Rd., Williamsburg, VA 23185).

BRIDE INFORMATION

Full Name _____
Street Address _____ Apt. # _____
City _____ State _____ Zip _____
Phone Home _____ Work _____
Date of Birth _____ Age at Date of Marriage _____
Baptized **Yes** _____ **No** _____ Confirmed **Yes** _____ **No** _____
Communicant of the Episcopal Church **Yes** _____ **No** _____
Father's Full Name _____
Mother's Full Name _____
Will this be your first marriage? **Yes** _____ **No** _____
If **No**, please indicate the number of previous marriages. _____
Relationship to St. Martin's Episcopal Church
Member _____ Family Member _____ Regular Attendee _____
Affiliate (Past or Present) _____ Other _____

GROOM INFORMATION

Full Name _____
Street Address _____ Apt. # _____
City _____ State _____ Zip _____
Phone Home _____ Work _____
Date of Birth _____ Age at Date of Marriage _____
Baptized **Yes** _____ **No** _____ Confirmed **Yes** _____ **No** _____
Communicant of the Episcopal Church **Yes** _____ **No** _____
Father's Full Name _____
Mother's Full Name _____
Will this be your first marriage? **Yes** _____ **No** _____
If **No**, please indicate the number of previous marriages. _____
Relationship to St. Martin's Episcopal Church
Member _____ Family Member _____ Regular Attendee _____
Affiliate (Past or Present) _____ Other _____

OTHER CONTACT PERSON (This should be someone easily accessible to the church office if clarification and/or additional information is necessary.)

Name _____
Street Address _____ Apt. # _____
City _____ State _____ Zip _____
Phone Home _____ Work _____
Relationship to Couple _____

WEDDING INFORMATION

Wedding Date _____ Time _____ Place _____
Rehearsal Date _____ Time _____ Place _____
Approximate Number of Guests _____
Officiating Minister _____
Organist _____ Other music? _____
Name of Maid (Matron) of Honor _____
Name of Best Man _____
Communion? Yes _____ No _____
Will the candles in the wall sconces be used? Yes _____ No _____

Bride is responsible for providing flowers

Name of Florist _____
Address _____ Phone _____
If the wedding is on a Saturday, will the flowers be left in the sanctuary for Sunday worship? Yes _____ No _____

Declaration of Intention

To be signed by all wishing to be married in the Episcopal Church

We, _____ and _____, desiring to receive the blessing of Holy Matrimony in the Church, do solemnly declare that we hold marriage to be a lifelong union of husband and wife as it is set forth in the Book of Common Prayer. We believe that the union of husband and wife, in heart, body, and mind, is intended by God for their mutual joy, for the help and comfort given one another in prosperity and adversity; and, when it is God's will, for the procreation of children and their nurture in the knowledge and love of the Lord. And we do engage ourselves, so far as in us lies, to make our utmost effort to establish this relationship and to seek God's help thereto.

Signature of Bride

Signature of Groom

Date

Date