

**St. Raymond of Peñafort
Catholic Church**



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WEDDING REQUEST

WEDDING DATE: _____ **TIME:** _____ **LANGUAGE:** _____

MUSIC BY: _____

By: Clary Varona 786.378.2112 [] YES [] NO

BRIDE'S INFORMATION

NAME: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

REGISTERED IN PARISH: [] YES [] NO

RECEIVED SACRAMENTS OF:

- BAPTISM [] YES [] NO
- HOLY COMMUNION [] YES [] NO
- CONFIRMATION [] YES [] NO

PREVIOUS MARRIAGE: [] YES [] NO

- CATHOLIC CHURCH [] YES [] NO
- CIVIL MARRIAGE [] YES [] NO

MOTHER'S MAIDEN NAME: _____

FATHER'S NAME: _____

MAID OF HONOR: _____

Submitted copy of the following Certificates:

- BAPTISM [] YES [] NO
- HOLY COMMUNION [] YES [] NO
- CONFIRMATION [] YES [] NO

GROOM'S INFORMATION

NAME: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

REGISTERED IN PARISH: [] YES [] NO

RECEIVED SACRAMENTS OF:

- BAPTISM [] YES [] NO
- HOLY COMMUNION [] YES [] NO
- CONFIRMATION [] YES [] NO

PREVIOUS MARRIAGE: [] YES [] NO

- CATHOLIC CHURCH [] YES [] NO
- CIVIL MARRIAGE [] YES [] NO

MOTHER'S MAIDEN NAME: _____

FATHER'S NAME: _____

GODPARENT: _____

Submitted copy of the following Certificates:

- BAPTISM [] YES [] NO
- HOLY COMMUNION [] YES [] NO
- CONFIRMATION [] YES [] NO

Renting the Parish Hall for the Wedding Celebration? [] YES [] NO If YES, specify time:

From: _____ To: _____

*******FOR OFFICE USE ONLY:**

Request Taken By: _____ Name: _____ Date: _____

Recorded in Wedding Book: _____ Date/ Initials: _____