**WEDDING AT ST MARK’S, LEAMINGTON SPA**

(PARISH OF NEW MILVERTON)

The following information is needed to complete the marriage certificate and for the reading of your banns (starting 6 weeks before the wedding), so that we can make arrangements and to prepare your invoice. When completed please return this form to St Mark’s church office and please contact us if you need any help or information:

01926 421004, office@st-marks.net

|  |  |  |
| --- | --- | --- |
| **Date & time of wedding** | **Date:**  **Time:** | |
|  | **GROOM** | **BRIDE** |
| **Christian names**  **(*as they appear on your birth certificate)*** |  |  |
| **Surname** |  |  |
| **Date of Birth** |  |  |
| **Have you been married before?** |  |  |
| **If so how did the marriage end?** |  |  |
| **Occupation** |  |  |
| **Address**  *Please let us*  *know if your address changes*  *before the wedding* |  |  |
| **Father’s full name & Occupation**  *Please also include whether retired or deceased* |  |  |
| **Mother’s Full Name** **& Occupation**  *Please also include whether retired or deceased* |  |  |
| **The parish you live in** |  |  |
| **Telephone number** |  |  |
| **Email Address** |  |  |

|  |  |
| --- | --- |
| **Please tick if you would like:** | **Yes/No**  *Office use only:*  *Organist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Verger: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Invoice amount: \_\_\_\_\_\_\_\_\_\_\_*  *Invoice sent:* \_\_\_\_\_\_\_\_\_\_\_ |
| **Organist** |  |
| **Bells** *(our bells are small and cannot be heard in the church)* |  |
| **Projection during the service/ Livestream**  *Subject to availability* |  |
| **Are you arranging a professional**  **video of the ceremony** |  |
| **Heating**  *Essential in winter and spring months* |  |