



St. Peter the Rock Catholic Church
Reservation for Wedding at St. Peter the Rock Catholic Church
Thomaston, Georgia

1. Bride or Groom completes Section 1 and submits form to the Officiating Priest or Deacon.
2. The Officiating Priest or Deacon Completes Section 2; either he or the couple returns the form to St. Peter's.

Bride

Groom

Full Name		
Address		
City-St-Zip		
Home Phone		
Work Phone		
Cell Phone		
Email		
Date of Birth		
Place of Birth		
Where were you raised?		
Occupation		
Is this your First Marriage?	Yes (circle one) No	Yes (circle one) No
Religion		
Registered Member at St. Peter's?	Yes (circle one) No	Yes (circle one) No
If no, where do you attend?		
If Catholic, check Sacraments received	<input type="checkbox"/> Baptism <input type="checkbox"/> First Eucharist <input type="checkbox"/> Confirmation	<input type="checkbox"/> Baptism <input type="checkbox"/> First Eucharist <input type="checkbox"/> Confirmation
(please check all that apply)		

Mass Attendance Circle One	Regular Seldom	(circle one)	Occasional Never		Regular Seldom	(circle one)	Occasional Never
Parent's Marital Status?							
Brothers/Sisters?							
How did the couple Meet?							
When did they Meet?							

St. Peter the Rock Catholic Church

Please verify with the St. Peter's Parish Office which dates and times are available.

Wedding Date requested: _____ Nuptial Mass Ceremony only

Wedding time (check one:) 11:00 a.m. Saturday 1:00 p.m. Saturday _____ Weekday: _____

Rehearsal Time (check one:) 5:00 p.m. Friday 6:00 p.m. Friday _____ Weekday: _____

Or Convalidation Date: _____

Officiant's Name _____

Parish Name _____

Address _____

City-State-Zip _____

Phone _____ Fax: _____

OFFICIANT completes the section below; he or the couple returns this entire form to St. Peter the Rock Catholic Church.

I have agreed to officiate at the above wedding in accordance with the guidelines outlined.

Signature _____ Date _____

Officiant Name and Title _____