St. Andrew the Apostle Parish
Wedding Information Form

1250 Barrydowne Road, Sudbury, ON P3A 3V7
tel. 705-566-1876 • email: standrewsudbury@gmail.com

Please complete and return it to the parish office. Please print neatly.

GROOM INFORMATION

First Name: _____ Middle Name: _____

Last Name: _____

Full Address (Street no. & name, apartment no., city, province, country)

Phone: _____ email: _____

Church of Baptism (City, Province, Country):

_____

Date of Birth (YYYY-MM-DD): _____

Place of Birth (City, Province, Country): _____

BRIDE INFORMATION

First Name: _____ Middle Name: _____

Last Name: _____

Full Address (Street no. & name, apartment no., city, province, country)

_____

Phone: _____ email: _____

Church of Baptism (City, Province, Country):

_____

Date of Birth (YYYY-MM-DD): _____

Place of Birth (City & Province): _____

MARRIAGE WITNESSES

Witness #1 — First Name: _____

Witness #1 — Last Name: _____

Witness #2 — First Name: _____

Witness #2 — Last Name: _____

WEDDING DETAILS

Preferred Wedding Date(s): _____

Preferred Time: _____

Nuptial Mass or Ceremony Without Mass: _____

Are you parishioners of St. Andrew? Yes / No **If no, current parish:**

_____

Marriage Preparation Completed? Yes / No **If yes, where and when:**

_____

CONTACT & FOLLOW-UP

Preferred contact method: Phone / Email

Preferred time for follow-up meeting: _____

Please advise priest if any special circumstances.