CHURCH WEDDING APPLICATION FORM EMMANUEL EPISCOPAL PARISH OF ORCAS ISLAND, WA

| Proposed Wedding day | & time | Rehearsal day & time: | |
|--|--|--|-------|
| Place of Wedding: Church | Labyrinth | Other | |
| Expected number of guests exp | pected for the wedding? _ | | |
| Would you like the wedding to | o include the Eucharist/C | ommunion? Yes No | |
| Are you planning on having m | nusic? Yes No Would y | ou like our organist to play? Yes N | lo |
| Did you receive Emmanuel's M | arriage Policies & Planning | Guide? Yes No | |
| Would you want to rent the Pa You should contact the parish office fo | arish Hall for the wedding r information of parish hall avail | g reception? Yes No lability, information, forms and fees; which are sepa | rate. |
| Person A | | | |
| first name | middle name | last name | |
| Birth last name (if different) | | | |
| Date of birth | | | |
| Birthplace: | | | |
| | | | |
| Email address | | | |
| Telephone | | | |
| Marital Status: single wid | dowed divorced | | |
| If divorced, number of previous | ıs marriage(s)? D | ivorce(s) finalized? Yes No | |
| Current religious affiliation | | | |
| Have you been: Baptized? | Confirmed? F | Received Holy Communion? | |
| Church currently attending (if | any) | Name, city and state | |
| Father/Parent's name | | · | |
| Birthplace | | | |
| Mother/Parent's name | | | |
| Birthplace | | | |
| Person B | | | |
| first name | middle name | last name | |
| Birth last name (if different) | | | |
| Date of birth | Current Age | Gender | |
| Birthplace: | (US sta | ite or country) | |
| Current Address | | | |

| Email address |
|--|
| Telephone |
| Marital Status: single widowed divorced |
| If divorced, number of previous marriage(s)? Divorce(s) finalized? Yes No |
| Current religious affiliation |
| Have you been: Baptized? Confirmed? Received Holy Communion? |
| Church currently attending (if any) Name, city and state |
| |
| Religious affiliation |
| Father/Parent's name |
| Birthplace (state or country) |
| Mother/Parent's name |
| Birthplace (state or country) |
| |
| |
| Wedding witness A |
| Name |
| Address |
| |
| Wedding witness B |
| Name |
| Address |
| |
| PRIOR TO THE SOLEMNIZATION, THE PARTIES SHALL SIGN THE |
| FOLLOWING DECLARATION OF INTENTION: |
| We understand the teaching of the church that God's purpose for our marriage is for our mutual joy, for the help and comfort we will give to each other in prosperity and adversity, and, when it is God's will, for the gift and heritage of children and their nurture in the knowledge and love of God. We als understand that our marriage is to be unconditional, mutual, exclusive, faithful, and lifelong; and we engage to make the utmost effort to accept these gifts and fulfill these duties, with the help of God and the support of our community. |
| (2022 Constitution & Canons of the Episcopal Church I,18:4 |
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| Signature of person A and date Signature of person B and date |