



# MARRIAGE/WEDDING INFORMATION FORM

(For all weddings to be officiated by Pastor Trimble or a GCFI Minister)

Please fill out and return to the Administrative Office

Today's Date: \_\_\_\_\_

## ABOUT THE HUSBAND TO BE

Name (Last, First, MI): \_\_\_\_\_

Phone (Day, Evening): \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Have you accepted Christ as your Lord and Savior? Yes No

### Association with GCFI:

- Partner (how long): \_\_\_\_\_
- Regular Visitor
- Belongs to another church: \_\_\_\_\_
- Does not belong to a church

## ABOUT THE WIFE TO BE

Name (Last, First, MI): \_\_\_\_\_

Phone (Day, Evening): \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Have you accepted Christ as your Lord and Savior? Yes No

### Association with GCFI:

- Partner (how long): \_\_\_\_\_
- Regular Visitor
- Member of another church: \_\_\_\_\_
- Not a member of a church

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**PREPARATION**

Which of the following have you completed?

- Before You Say I do
- Prepare & Enrichment Inventory
- Counseling with Pastor Trimble

Do you have a wedding coordinator? Yes No

Whom? (Name and Phone): \_\_\_\_\_

**ABOUT THE WEDDING**

Date (preferred): \_\_\_\_\_

Time: \_\_\_\_\_

Ceremony Location: \_\_\_\_\_

Reception Location: \_\_\_\_\_

Ceremony Officiator: \_\_\_\_\_



**For Office Use Only**

- Wedding date confirmed
- BFYSID
- P&E
- Counseling dates scheduled (list): \_\_\_\_\_
- Met with wedding consultant

Date Received: \_\_\_\_\_

Init. \_\_\_\_\_