

WEDDING DATE AND TIME REQUESTED: _____
Month Day Year Time

**WEDDING APPLICATION
GREEN HILL PRESBYTERIAN CHURCH**

GROOM

Name _____

Address _____

City _____ State _____ Zip _____

Nickname: _____

Telephone Numbers:

_____ (Cell)

_____ (Home)

Email address _____

Date of Birth _____

Parents' Names _____

Church Affiliation _____

Single, Widowed, _____ No. of times _____
or Divorced? _____ Married? _____

Occupation _____

Date of Rehearsal: _____

Wedding Party:

Best Man: _____

Ushers: _____

Ring Bearer: _____

BRIDE

Name _____

Address _____

City _____ State _____ Zip _____

Nickname: _____

Telephone Numbers:

_____ (Cell)

_____ (Home)

Email address _____

Date of Birth _____

Parents' Names _____

Church Affiliation _____

Single, Widowed, _____ No. of times _____
or Divorced? _____ Married? _____

Occupation _____

Time of Rehearsal: _____

Maid of Honor _____

Bridsmaids: _____

Flower Girl: _____

Names after Marriage:

Address after Marriage:

Phone after Marriage:

Please return form to: Green Hill Presbyterian Church
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Wilmington, DE 19807-0892
302-652-5065
info@greenhillpres.org