

**OUR SAVIOR LUTHERAN CHURCH**

**3775 Middle Road  
Bettendorf, Iowa 52722**

**APPLICATION FOR WEDDING**

Bride's Full Name \_\_\_\_\_  
Present Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Religion \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place \_\_\_\_\_  
Father's Name \_\_\_\_\_ Religion \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_  
Occupation \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Total Number of Previous Marriages \_\_\_\_\_  
Children (Names, Birth Dates) \_\_\_\_\_  
Last Marriage ended by: Death \_\_\_\_\_ Divorce \_\_\_\_\_ When? \_\_\_\_\_

Groom's Full Name \_\_\_\_\_  
Present Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Religion \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place \_\_\_\_\_  
Father's Name \_\_\_\_\_ Religion \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_  
Occupation \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Total Number of Previous Marriages \_\_\_\_\_  
Children (Names, Birth dates) \_\_\_\_\_  
Last Marriage ended by: Death \_\_\_\_\_ Divorce \_\_\_\_\_ When? \_\_\_\_\_

We understand that pre-marriage counseling is a pre-requisite to being married at Our Savior Lutheran Church. Yes \_\_\_\_\_

We desire to have our marriage ceremony conducted in Our Savior Lutheran Church

Yes \_\_\_\_\_ No \_\_\_\_\_ Tentative Date \_\_\_\_\_

Signed: Bride \_\_\_\_\_ Groom: \_\_\_\_\_

*(Complete & e-mail to address above; upon receipt of this application, you will receive a wedding manual.)(After a first consultation with a pastor a wedding date may be confirmed.)*

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Revised 6/9/15    Office Use Only    \_\_\_ Member    \_\_\_ Non-member    \_\_\_ Pastor Officiating  
\_\_\_ Application reviewed by Lead Pastor    \_\_\_ Date approved by Parish Administrator