



St John The Evangelist Parish Riverstone

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PLEASE PRINT CLEARLY

WEDDING BOOKING FORM
DATE AND TIME OF WEDDING
LOCATION OF WEDDING
NAME OF PRIEST

BRIDE AND GROOM INFORMATION
FULL NAME OF BRIDE
HOME ADDRESS
EMAIL ADDRESS
PHONE NUMBER
RELIGION

FULL NAME OF GROOM
HOME ADDRESS
EMAIL ADDRESS
PHONE NUMBER
RELIGION

COUPLE COMMITMENT

We have read and accept the Marriage Information sheet.

YES

NO

**BRIDE'S
SIGNATURE**

DATE

**GROOM'S
SIGNATURE**

DATE

The Catholic Church requires six (6) months' notice of your intended wedding. Please avoid making any other bookings until the church date is confirmed, including booking of a reception hall. Please return this signed form to the parish office with a non-refundable deposit of \$100.

If you have any questions, feel free to contact the Parish Office on 02 9627 1176 or email stjohns10@bigpond.com

OFFICE USE ONLY

Non-refunded donation received Yes/No

Offering Received Yes/No

Date:

Date

\$

\$

First appointment with priest

Additional Information

____ / ____ / ____