



ST. JOHN *the* BAPTIST
catholic church

Marriage Application

Please Print

Requested Date & Time of Wedding: _____

Requested Date & Time of Rehearsal: _____

(The date is tentative until you hear from the presiding priest or deacon.)

Bride's Name: _____

Cell Phone: _____ Email: _____

Address: _____

Date of Birth: _____ Religion: _____

Church of Baptism: _____

Current Church Parish: _____

Have you been married before (in church or civilly)? _____

Groom's Name: _____

Cell Phone: _____ Email: _____

Address: _____

Date of Birth: _____ Religion: _____

Church of Baptism: _____

Current Church Parish: _____

Have you been married before (in church or civilly)? _____

Officiating Priest or Deacon: _____

(If not assigned here, His Parish and Diocese: _____)

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