



Wedding Reservation Form

After you have verified the date with the parish staff, please mail in this form with your deposit.

Date of Wedding: _____ Time: _____

Date of Rehearsal: _____ Time: _____

Bride's Information

Full Name: _____ Religion: _____

Address: _____

Phone: _____ Email: _____

Groom's Information

Full Name: _____ Religion: _____

Address: _____

Phone: _____ Email: _____

Presiding Priest or Deacon's Information

Presider's Name: _____

Parish/Ministry Assignment (if applicable): _____

Address: _____

Rite to be used (check one): Matrimony within Mass

Matrimony without Mass (Liturgy of the Word)

Has this priest or deacon firmly committed to presiding at your wedding and leading your marriage preparation?

Yes ___ No ___

Have you both read and agree to follow the *Saint Boniface Wedding Policies and Guidelines*?

Yes ___ No ___

Signatures: _____

Bride

Groom

A deposit of \$980.50 (925.00 = fee, 55.50 = Tax) , along with this form, is required to reserve the date. The remaining \$980.50 is due one month before the wedding. Send to: **Saint Boniface Church, 531 E. Liberty St., Louisville, KY 40202**

----- **For Office Use** -----

Deposit received on: _____ Check # _____

Balance received on: _____ Check # _____

Date entered into Sacramental Registry: _____ Book/Entry: _____

Notification sent to places of Baptism: _____ Certificate mailed: _____

Copy to: Organist ___ Wedding Coordinator ___ Business Manager ___