



Saint  
**Boniface**  
CATHOLIC CHURCH

## Wedding Reservation

*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 \$925, along with this form, is required to reserve the date. The remaining \$925 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 \_\_\_