

WEDDING APPLICATION
ST. JOHN LUTHERAN CHURCH
146 6TH AVE. W DICKINSON, ND 58601

After reading the Cover Letter from the pastor(s) and reviewing the Wedding Policy, please complete the following information for our records. Return this Wedding Application to the church office to schedule your wedding at St. John Lutheran Church.

~ GROOM'S INFORMATION ~

Name _____

Address _____

Home phone _____

Cell phone _____

Personal email _____

Employment _____

Work phone _____

Work email _____

Church Membership
(list church name, city & state)

~ BRIDE'S INFORMATION ~

Name _____

Address _____

Home phone _____

Cell phone _____

Personal email _____

Employment _____

Work phone _____

Work email _____

Church Membership
(list church name, city & state)

Legal name after the wedding

"I have read the Cover Letter and the Wedding Policy."

Signature of the Groom

Signature of the Bride

Requested Wedding Date _____

Requested Pastor (if you have a preference) _____

(The pastors reserve the right to substitute for one another, depending on the scheduled wedding date.)

~ ~ ~ ~ ~

Office use:

Date rec'd application _____

Scheduled _____ Y _____ N

Pastor signature _____

CMS _____ NN _____