

MARRIAGE SEMINAR REGISTRATION FORM

Please complete the following information as you register for the Marriage Seminar of your choice. This information helps us design seminars which will be helpful to you.

Date and Time of Your Wedding: _____

WE WOULD LIKE TO REGISTER FOR THIS MARRIAGE SEMINAR:

First Choice Date(s): _____ Second Choice Date(s): _____

BRIDE'S INFORMATION

Name: _____ Email Address: _____

Address: _____ City: _____ Zip: _____

Phone: Home _____ Work _____ Okay to contact at work? Yes _____ No _____

Faith tradition/denominational background: _____ Occupation: _____

Particular interests, leisure activities: _____

Have you been married before?: _____ Do you have children?: _____

GROOM'S INFORMATION

Name: _____ Email Address: _____

Address: _____ City: _____ Zip: _____

Phone: Home _____ Work _____ Okay to contact at work? Yes _____ No _____

Faith tradition/denominational background: _____ Occupation: _____

Particular interests, leisure activities: _____

Have you been married before?: _____ Do you have children?: _____

PREFERRED MAILING ADDRESS: Bride _____ Groom _____ Send to both _____

Is there anything you'd like us to know about your plans, hopes and challenges as a couple? _____

What topics would be most helpful to you in the Marriage Seminar?: _____

Please send this completed form to:

The Marriage Seminar
Fauntleroy Church United Church of Christ
9140 California Avenue SW
Seattle WA 98136-2556

Email: info@fauntleroyucc.org Website: www.fauntleroyucc.org