

**WEDDING REQUEST CONTACT SHEET**  
Holy Angels Parish—PO Box 166, La Valle, WI 53941



**Please Print Groom**

NAME \_\_\_\_\_

Last

First

Middle

ADDRESS \_\_\_\_\_

Street

City

State

Zip

TELEPHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

Religion \_\_\_\_\_ Current Parish \_\_\_\_\_ Baptized? Yes \_\_\_ No \_\_\_

Father's Full Name \_\_\_\_\_

Mother's Full Name with Maiden Name \_\_\_\_\_

Parish and City Baptized \_\_\_\_\_

Confirmed? Yes \_\_\_ No \_\_\_

Parish and City Confirmed \_\_\_\_\_

**Please Print Bride**

NAME \_\_\_\_\_

Last

First

Middle

ADDRESS \_\_\_\_\_

Street

City

State

Zip

TELEPHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

Religion \_\_\_\_\_ Current Parish \_\_\_\_\_ Baptized? Yes \_\_\_ No \_\_\_

Father's Full Name \_\_\_\_\_

Mother's Full Name with Maiden Name \_\_\_\_\_

Parish and City Baptized \_\_\_\_\_

Confirmed? Yes \_\_\_ No \_\_\_

Parish and City Confirmed \_\_\_\_\_

**Maid/Matron of Honor**

NAME \_\_\_\_\_

Last

First

Middle

**Best Man**

NAME \_\_\_\_\_

Last

First

Middle

WEDDING SCHEDULED FOR \_\_\_\_\_

Month

Day

Year

Time

(Date will be certified after Marriage prep is complete.)

Worship Site of Marriage \_\_\_\_\_