

Wedding Registration

Grace Lutheran Church

Bride's Info

Date: _____

Name: _____

Date of Birth: _____

Present Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Occupation: _____ Email: _____

Mother's Name: _____ Father's Name: _____

Groom's Info

Name: _____

Date of Birth: _____

Present Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Occupation: _____ Email: _____

Mother's Name: _____ Father's Name: _____

Service Notes

Wedding Date/Location: _____

Rehearsal Date/ Location: _____

Presiding Clergy: _____

Readers: _____

Organist: _____ Soloist: _____

Best Man: _____ Maid/Matron of Honor: _____

Additional Notes: