

Banns of Marriage & Wedding Request Form *(Please complete fully in BLOCK CAPITALS)*

MAN

WOMAN

1. Full Name
2. Date of birth Age on wedding day
3. Nationality
4. Telephone number
5. E-mail
6. Current address
..... How long have you lived there?
7. Your Parish Church
8. Marital status (please delete) – single / widower / divorced
9. Profession or Occupation
10. Are you baptised? If so, at which church?
11. Father's full name if deceased add 'deceased'
-
12. Father's profession or occupation if retired add 'retired'
-
15. Are you both related or connected by marriage, if so how?
16. At which Church do you wish to marry? At what date & time?
17. Future address

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I hereby certify that, to the best of my belief, these answers are correct. Signature Signature Date

Please return form to: Farlington Parish Office, Church of the Resurrection, Penrhyn Avenue, Portsmouth, PO6 2AP.

Tel No.

02392 421849

E-mail:

office@farlingtonparish.co.uk