



## Wedding Application

Groom's Information	
Name	DOB
Address	City, State ZIP
Phone	Email
<b>Previous Marriage?</b> <input type="checkbox"/> <b>Yes, I have been married before</b> <input type="radio"/> When did your previous marriage legally end? ___/___/___ <input type="radio"/> How did your previous marriage end? <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> <b>No, this is my first marriage</b>	
<b>Do you have any children?</b> <input type="checkbox"/> <b>Yes, I have children with my fiancé, or my fiancé is pregnant</b> (Due Date: ___/___/___) <input type="checkbox"/> <b>Yes, I have children from a previous relationship</b> <input type="checkbox"/> <b>No, I do not have any children</b>	
<b>Member of PLC?</b> <input type="checkbox"/> <b>Yes, I am a member of PLC</b> <input type="checkbox"/> <b>No, I am not a member, but I attend PLC regularly</b> <input type="checkbox"/> <b>No, I am not a member or regular attendee of PLC</b>	
Describe your spiritual background.	
Describe your current spiritual journey.	
Why do you want to get married?	

<b>Bride's Information</b>	
<b>Name</b>	<b>DOB</b>
<b>Address</b>	<b>City, State ZIP</b>
<b>Phone</b>	<b>Email</b>
<b>Previous Marriage?</b> <input type="checkbox"/> <b>Yes, I have been married before</b> ○ When did your previous marriage legally end? ___/___/___ ○ How did your previous marriage end? <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> <b>No, this is my first marriage</b>	
<b>Do you have any children?</b> <input type="checkbox"/> <b>Yes, I have children with my fiancé, or I am pregnant (Due Date: ___/___/___)</b> <input type="checkbox"/> <b>Yes, I have children from a previous relationship</b> <input type="checkbox"/> <b>No, I do not have any children</b>	
<b>Member of PLC?</b> <input type="checkbox"/> <b>Yes, I am a member of PLC</b> <input type="checkbox"/> <b>No, I am not a member, but I attend PLC regularly</b> <input type="checkbox"/> <b>No, I am not a member or regular attendee of PLC</b>	
<b>Describe your spiritual background.</b>   	
<b>Describe your current spiritual journey.</b>   	
<b>Why do you want to get married?</b>   	

<b>Wedding Information</b>	
<b>Wedding Date</b>	<input type="checkbox"/> Firm <input type="checkbox"/> Tentative
<b>Desired Pastor (please note your desired pastor may not be available)</b>	
<input type="checkbox"/> Chris Rygh <input type="checkbox"/> Jesse Tink <input type="checkbox"/> Chip Uhrmacher <input type="checkbox"/> Carl Carey <input type="checkbox"/> Kelvin Cooke	<input type="checkbox"/> Not Applicable - Counseling Only
<b>Desired Location (please note your desired location may not be available)</b>	
<input type="checkbox"/> Cedar Falls – Worship Center <input type="checkbox"/> Cedar Falls – Chapel <input type="checkbox"/> Off-site: _____	<input type="checkbox"/> Not Applicable - Counseling Only

**Submit to:**  
**Care at Prairie Lakes Church**  
**1907 Viking Road**  
**Cedar Falls, Iowa 50613**

<b>For Office Use Only</b>	
<b>Application Received</b> (date, person)	
<b>Approval</b> <input type="checkbox"/> Approved <input type="checkbox"/> Declined Explanation if declined	
<b>Contract Returned</b> (date, person)	
<b>Deposit Submitted</b> (date, check number, person)	
<b>Pastor Confirmed</b>	
<b>Wedding Date, Time, Location Reserved</b>	
<b>Rehearsal Date, Time, Location Reserved</b>	
<b>Balance Submitted</b> (date, check number, person)	