ST. ISAAC JOGUES CHURCH

Request for an Interview for Marriage

GROOM

Surname: _____ Given Name (s): _____

Date of Birth: _____ Age: _____

Address of Residence: _____

City/Town: _____ Postal Code: _____

Telephone number Home: _____ Work: _____

Present Religion: _____ email: _____

Church of Baptism: _____ City/Town: _____

Date of Baptism: _____ Religion: _____

Are you registered in this Parish? _____

BRIDE

Surname: _____ Given Name(s): _____

Date of Birth: _____ Age: _____

Address of Residence: _____

City/Town: _____ Postal Code: _____

Telephone number Home: _____ Work: _____

Present Religion: _____ email: _____

Church of Baptism: _____ City/Town: _____

Date of Baptism: _____ Religion: _____

Are you registered in this Parish? _____

OFFICE USE ONLY

To be interview by: Fr. Dobson __ Fr. Kluger __
Deacon Ovcjak __ Deacon Sylvan __

Date of Interview: _____ Time of Interview: _____

*** Baptism certificates must be attached, prior to an interview date being given.**