



**"FAITH. FAMILY. COMMUNITY."**  
**HOLY TRINITY GREEK ORTHODOX CHURCH**



Our Mission: "To proclaim and live the Orthodox Christian Faith  
in its fullness as faithful members of the Body of Christ."

Reverend Father John Touloumes, *Proistamenos*  
Reverend Father Radu Bordeianu, *Assistant Priest*

**WEDDING INFORMATION FORM**

**Please complete and mail or email to the Church Office within 7 days**

INFORMATION	GROOM	BRIDE
Full Legal Name		
Residence Address, City, State, Zip		
Phone		
Email		
Birthplace ( <i>City, State</i> )		
Birthdate ( <i>MM/DD/YYYY</i> )	Age: <input style="width: 40px;" type="text"/>	Age: <input style="width: 40px;" type="text"/>
Date of Baptism ( <i>Certificate required</i> )		
Religion of Baptism		
Date of Orthodox Chrismation		
Current religion		
Usual Occupation		
Father's Name		
Father's Birthplace		
Father's Religion		
Mother's <b>Maiden</b> Name		
Mother's Birthplace		
Mother's Religion		
Have you ever been married?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>If "Yes", complete Supplementary Form 165, regardless where marriage took place</i>	
Are you related to the intended...	bride? <input type="checkbox"/> Yes <input type="checkbox"/> No	groom? <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," by blood (cousins, etc.)?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," by marriage to relative?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Sponsor ( <i>Koumbaro/a</i> )		
Residence Address, City, State, Zip		
Home Parish ( <i>Must be Orthodox</i> )		
Anticipated date of Wedding	Day of week	Time
Anticipated date of Rehearsal	Day of week	Time
Organist	Chanter	