

Wedding Questionnaire

BRIDE

Contact Information

_____ full legal name, first middle last

_____ current address city, state, zip

_____ cell phone email date of birth

Church Affiliation

_____ yes _____ no if yes, where? _____ member _____ non-member

Background

Previously married? _____ yes _____ no if yes, how many times? _____

If the previous marriage(s) ended in divorce, please answer the following.

Reason for divorce(s):

What reconciliation efforts were made:

Date divorce(s) were finalized: _____

Any children? _____ yes _____ no

Testimony of Faith

Describe your relationship with Christ at this point in your life.



THE WEDDING CEREMONY

Ceremony

_____ location _____ address _____ city, state, zip

_____ date of wedding _____ time of wedding _____ date of rehearsal _____ time of rehearsal

number of guests anticipated at the wedding _____

Reception

_____ yes _____ no

_____ location _____ address _____ city, state, zip

RELATIONSHIP

How long have you known one another? _____

How long have you dated each other? _____

How long have you been engaged? _____

What are your biggest fears, questions, uncertainties...?

What hopes, expectations, needs, etc. do you have regarding your marriage counseling sessions?

_____ after-wedding address _____ city, state, zip