## **FAITH DELIVERANCE WORSHIP CENTER**

## **APPLICATION FOR MARRIAGE CEREMONY**

Proposed Date for Weddin	g:			
(Saturday Only)	month	day	year	
Time:				
Alternate Date for Wedding	g:			
(Saturday Only)	month	day	year	
Time:				
Name of Applicant:		<i>I</i>	_Age	
Address/Phone Number:				
	address	apartment number		
_	city	state	zip	
(	)	()		
	Home phone	Work ph	none	
Email Address:				
Member of FDWC:	YES	NO		
Accepted Christ as Savior	YES	NO		
Name of Fiancée:		Age		
Address:				
	address	apartment number		

	city		state	zip		
Phone:	()	hone	() Work phone			
	'		·			
Email Address:						
Member of FDWC:	YES		NO			
Accepted Christ as Savior	YES		NO			
Faith Deliverance Worship Center	r					
Application for Marriage Ce	remony					
Page 2 of 2						
Address After Wedding:						
Phone	()					
Marital Status Information						
Marital Status: Bride	Single	Divorced	Wid	dow		
Marital Status: Groom	Single	Divorced	Wic	dow		

If divorced, explain the circumstances of the divorce:

Required Counseling Classes/Meetings			
We will attend three Love Enrichment Classes:	YES	NO	
If No, explain the reason why you cannot attend.			
We will attend Engaged Couples Seminar:	YES	NO	
If No, explain the reason why you cannot attend.			
We will meet with the minister who will perform the lift No, explain the reason why you cannot meet.	e ceremony.	YES	NO
Faith Deliverance Worship Center			
Application for Marriage Ceremony			
Page 3 of 3			
Is there any other information you would like Pasto	or Ricks to kn	ow when con	sidering your application?
Thank you for your application. We will contact yo	ou within three	e weeks rega	<ul><li>rding the status of your application.</li></ul>