



St. Paul CME Church Wedding Form

Bride _____ **Phone** _____

Groom _____ **Phone** _____

Bride's email _____

Groom's email _____

Wedding Date _____ **Time** _____

Location _____

Officant _____

Number in Wedding Party _____ **Anticipated Guest** _____

Counseling Session #1 _____

Counseling Session #2 _____

Counseling Session #3 _____