

PRELIMINARY REGISTRATION FORM

Bride's Last Name | Groom's Last Name

STAFF NAME: Janette Villeneuve TODAY'S DATE:

STAFF CONTACT: Email: jvilleneuve@sjresort.com Direct Dial: 734.414.1104 FAX: 734.414.0606

PREFERRED WEDDING DAY & DATE: TIME: AM PM

Chapel dates cannot be confirmed until all required documents are submitted and approved.

BRIDE'S NAME: Last Name First Name
ADDRESS: Street City State Zip
RELIGION: CATHOLIC, LATIN RITE CATHOLIC, EASTERN RITE OTHER
BAPTIZED: YES NO CONFIRMED: YES NO
PARISH REGISTERED IN:
PRIOR MARRIAGE(S): YES NO CIRCUMSTANCES:
IF YES: HAS ANNULMENT BEEN GRANTED? YES NO IS IT IN THE PROCESS? YES NO
DAYTIME PHONE: ALTERNATE PHONE:
E-MAIL ADDRESS: BIRTHDATE:

GROOM'S NAME: Last Name First Name
ADDRESS: Street City State Zip
RELIGION: CATHOLIC, LATIN RITE CATHOLIC, EASTERN RITE OTHER
BAPTIZED: YES NO CONFIRMED: YES NO
PARISH REGISTERED IN:
PRIOR MARRIAGE(S): YES NO CIRCUMSTANCES:
IF YES: HAS ANNULMENT BEEN GRANTED? YES NO IS IT IN THE PROCESS? YES NO
DAYTIME PHONE: ALTERNATE PHONE:
E-MAIL ADDRESS: BIRTHDATE:

Will you be bringing in your own presider for your ceremony? Yes No Undetermined
Will your reception be held at Saint John's Resort? If yes, do you have a tentative contract? Yes No Undetermined

NOTES: