

MARRIAGES

ADDITIONAL INFORMATION REQUIRED

Day and Date of Marriage

Time

Place of Marriage

--	--	--

GROOMS' INFORMATION

BRIDES' INFORMATION

Full Name

Full Name

--	--

Are the Bride and Groom Related

Yes / No

Contact Details

Contact Details

Home Number:	Home Number:
Mobile:	Mobile:
Work:	Work:

Address after Marriage:

Witness details: *Usually Bestman & Bridesmaid but can be anyone 16 years old and over*

Name:	Name:
Address:	Address:
Postcode:	Postcode:

Officiants Details (For religious ceremonies only)

Name:	Denomination:
Address:	
	Postcode:

Please Note (For Religious Weddings Only)

The Schedule of Marriage Form is to be collected only by the bride or groom before the ceremony on the date specified by the Registrar.

PLEASE TURN OVER

MARRIAGES

ADDITIONAL INFORMATION CONTINUED

Please tick which option is applicable to you:	
GROOM	BRIDE
Employee	Employee
Self Employed	Self Employed
Student	Student
Looking after house/family	Looking after house/family
Permanently sick or disabled	Permanently sick or disabled
Independent means	Independent means
No previous job	No previous job

Pease tick which option is applicable to you:	
GROOM	BRIDE
Manager 1 – 24 employees	Manager 1 – 24 employees
Manager 25 + employees	Manager 25 + employees
Supervisor	Supervisor
Employee	Employee
EMPLOYER 1 – 24 employees	EMPLOYER 1 – 24 employees
EMPLOYER 25 + employees	EMPLOYER 25 + employees
No Employees	No Employees

Ceremony Details (For Civil Ceremonies only)	
Number of guests: <i>(50 maximum in Ardeevin)</i>	Number of rings to be exchanged:
Disabled access required at Ardeevin Yes / No	Name & relationship of Person giving bride away (if applicable):
Readings or Poems Yes / No (if yes, copy to be provided)	
Providing your own Music eg: Harpist/String Quartet/Singer/CD Yes / No	
Will there be a photographer/videographer Yes / No	
Are you using your own floral displays in Ardeevin, Registry Office Yes / No	