



St George's Anglican Church

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ABN 25 010 800 682

WEDDING SERVICE FORM

Today's Date:

Date of Wedding:

Time of Service:

	GROOM	BRIDE
Surname		
Full Christian Name		
Occupation		
Residential Address		
Contact Details: Work		
Home		
Mobile		
Email Address		
Date of Birth		
Religious Denomination		
Birth Certificates seen	Yes / No	Yes / No
Are you Baptised	Yes / No	Yes / No
Are you Confirmed	Yes / No	Yes / No



Interviews:

Date

Time

First

Second

Third

Rehearsal

Marriage Preparation Courses:

Discussed

Yes / No

Brochures sent to party

Yes / No

Party attended courses

Yes / No

SERVICE PLANNING

Aim for the Service:

Numbers:

Guests

Bridesmaid/s

Groomsman/en

Page boys

Flower girls

Bridal cars

Name of the Photographer: _____

Video at the church:

Yes / No

Lighting at the church:

Yes / No



St George's Anglican Church

Decorations:

Flowers

Pew Bows

Yes / No

Yes / No

Music:

Organist required

Choir required

Singer required

Hymns

Yes / No

Yes / No

Yes / No

Yes / No

Readings:

Yes / No

Fees discussed (\$1,980): Yes / No

Order of Service required: Yes / No

Reception Venue: _____

Other Additional Information: _____

Office Use Only:

Date

Notice of Intended Marriage Form filled and signed: _____

Marriage Information Sheet filled: _____

Draft Service sent to party: _____

Final Service sent to party: _____

Deposit payment received: _____

Remainder of payment received: _____