

Christ Our King Catholic Church 1149 Russell Drive Mount Pleasant, SC 29464 (843) 884-5587

Form D WEDDING AGREEMENT

Requested Wedding D	Date:	Time:	
Requested Rehearsal I	Date:	Time:	
Please print legibly.	BRIDE	GROC	PM
Full Name			
Religion			
Home Address			
City / State / Zip			
Cell Number			
Email Address			
Parish Name			
Parish City & State			
Liturgy:	MassLiturgy of	the Word	
Best Man:	Maid /Matro	on of Honor:	
them fill out Form C)	,	r than a priest or deacon of Christ ou	
HIS Parish's Name:	Parish Address:		
His Telephone:	His Email:		
Church. We agree to comply a <u>Church</u> of the Parish and/or	with these and any subsequent addi Diocese. We understand and accep	ning the celebration of weddings at itions to Polices for Weddings at C t the conditions that we and all mem l, must follow regarding personal c	Christ Our King Catholic obers of our wedding party,
Signature of the Groot	m Date	Signature of the Bride	Date
Application Approved /	ved By /s/	Check # \$\$	