



# Archdiocese of Boston Marriage Preparation Registration Form

**To register:** Please send this registration form and a deposit of \$100 to the address below. Please make checks payable to: *Marriage Ministries*. The remainder of the balance can be paid upon arrival. Once registered, you will receive confirmation and additional information including directions.

**Return to:** (with \$100 deposit)

*Archdiocese of Boston  
Marriage Ministries  
66 Brooks Drive  
Braintree, MA 02184-3839*

**Bride's Information:**

- 1) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
- 2) Street Address: \_\_\_\_\_
- 3) Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- 4) Email Address: \_\_\_\_\_
- 5) Home Phone: \_\_\_\_\_
- 6) Cell Phone: \_\_\_\_\_
- 7) Work Phone: \_\_\_\_\_
- 8) Religion (optional): \_\_\_\_\_
- 9) Home Parish Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

**Groom's Information:**

- 1) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
- 2) Street Address: \_\_\_\_\_
- 3) Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- 4) Email Address: \_\_\_\_\_
- 5) Home Phone: \_\_\_\_\_
- 6) Cell Phone: \_\_\_\_\_
- 7) Work Phone: \_\_\_\_\_
- 8) Religion (optional): \_\_\_\_\_
- 9) Home Parish Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

**Wedding Information:**

- 1) Wedding Date: \_\_\_\_\_
- 2) Parish Name: \_\_\_\_\_
- 3) Parish Town: \_\_\_\_\_ State: \_\_\_\_\_
- 4) Priest/Deacon overseeing your preparation: \_\_\_\_\_
- 5) Priest/Deacon Street Address: \_\_\_\_\_
- 6) Priest/Deacon Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- 7) Priest/Deacon Email Address: \_\_\_\_\_
- 8) Priest/Deacon Phone Number: \_\_\_\_\_