

SHARON ASSEMBLY OF GOD CHURCH

4th floor, Satyanarayana Enclave, Madinaguda - 500049,

APPLICATION

Christian Banns, and / or Engagement / or Church Wedding (BRIDE AND GROOM TO FILL SEPARATE APPLICATIONS)

Full Name:		(M/F)	
	Phone :		
	Place of Birth :		
		Work Place:	
Father's Name :	Mother's Name :		
Have you ever been Marrie	d Before ? (if yes give details) :		
Have you ever been Engage	d before ? (if yes give details) :		
Previous Religious Backgro	oundEthnic / Lan	guage Background	
Have you accepted Christ a	s your personal Savior? (YES/NO)	Date:	
Have you been Baptized in	water ? (YES/NO)	Date:	
Member of what Church : Attending since :			
Name of Intended Marriage	Partner:		
Do your parents approve of	this marriage? (if no or reluctantly, give ex	planation)	
Date and time of Engageme	nt and / or Wedding :		
I / We Certify by My / Our	Signature that it is My / Our desire and Requ	uest that Reverend :	
Pastor, Assemblies of God,	provide Pre-martial Counseling, and/or sole	mnize the Engagement Ceremony, and/or	
the Marriage Ceremony for	us:		
(Name)		(Signature and Date)	

<u>Note</u>: Please arrange with the Pastor the date and time of the Engagement Ceremony or Pre-marital Counseling and for planning of the Wedding Service.

"Marriage is honourable in all, -Heb 13:4