

Application Form

	Bride's Details	Groom's Details
Full Name		
Current Address		
Address Since		
Phone		
Email		
Date of Birth		
Occupation/Profession		
Have you been married before? Please circle If yes, please complete the section on page 3	Yes No	Yes No
Previous partner still living?	Yes No	Yes No
Have you ever been in a civil partnership	Yes No	Yes No
Are you a foreign national?	Yes No	Yes No
The Parish (in which you live)		
Are you related, or are you connected by marriage? If so, how?		
Keeping in touch: if address is due to change, please note new address here		
	<p>BRIDE'S FATHER</p> <p>Full Name:</p> <p>Occupation/Profession:</p> <p>Deceased? Yes No</p>	<p>GROOM'S FATHER</p> <p>Full Name: 1</p> <p>Occupation/Profession:</p> <p>Deceased? Yes No</p>

Please indicate how you are connected with the Mission Area of Valle Crucis, by ticking the relevant box below.

You may have several connections with one of our churches, but only one is required.

Text in italics shows the only cases where baptism is required of either the bride or groom.

In the cases of connections 3-9, clergy need to refer to the House of Bishops' guidance and companion form at www.churchsupporthub.org/marriage-measure. The couple must additionally complete the relevant parts of that form.

This couple is connected if:

One of them:

1. lives in the Mission Area or
2. *is on the Mission Area electoral role* or
3. has at any time lived within the Mission Area for a period of at least 6 months or
4. has habitually attended normal church services in the parish church for a period of at least 6 months or
5. *was baptised in a church within the Mission Area* or
6. *was prepared for confirmation in one of the Mission Area churches* or

One of their parents; at any time after they were born:

7. has lived in the Mission Area for a period of at least 6 months or
8. has at any time habitually attended normal church services within the Mission Area for a period of at least 6 months or

One of their parents or grandparents:

9. was married in a church within the Mission Area or

The couple is eligible if:

10. they have been granted a Special Licence

	A person who is divorced	A second person who is divorced (if applicable)
Date and place of previous marriage, and age at that time		
Name of previous spouse		
Date of separation		
Date of decree absolute		
Age(s) of any children		
Was this your only previous marriage? If not, please provide details of any other marriages on a separate sheet		
Please state why you want to be married in church		
Is this your first application for marriage in church after divorce? If not, please give the name, address and telephone number of the priest to whom you previously applied		

To the best of my belief the answers to the above questions are correct.

I agree to the use of the information on this form as described below.*

Bride:

Dated:

Groom:

Dated:

* For the purposes of data protection law, the data controller is the Minister of the parish and the Mission Area Conference who will use the information on this form to ensure that the legal requirements relating to the marriage are compiled with and to make arrangements for the wedding ceremony. The Minister and MAC will only share the information with those who need to see it for those purposes.

Please return this form to:

Email: frleetaylor@hotmail.co.uk

or

Post: The Vicarage, Abbey Road, Llangollen LL20 8SN