



ST. GEORGE'S ANGLICAN CHURCH  
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Telephone (242) 322-1139 / (242) 325-8997  
website: www.saintgeorgebamas.org

**MARRIAGE APPLICATION FORM - PLEASE PRINT**

**THE BRIDE**

Bride's Surname: \_\_\_\_\_ Christian Name: \_\_\_\_\_  
Other Names: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Place of Business: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

**THE GROOM**

Groom's Surname: \_\_\_\_\_ Christian Name: \_\_\_\_\_  
Other Names: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Mother's Surname: \_\_\_\_\_ First Name: \_\_\_\_\_  
Place of Business: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**ADDITIONAL INFORMATION**

Date of Wedding: \_\_\_\_\_  
Best Man or Witness 1: \_\_\_\_\_  
Maid (Matron) of Honour or Witness 2: \_\_\_\_\_  
Officiating Minister: \_\_\_\_\_  
Marriage License Number: \_\_\_\_\_