

## *Engaged Encounter Registration Form*

Please complete this form FOUR MONTHS before your proposed wedding date. Include payment in the form of a MONEY ORDER for \$200 made out to: Office of Family Service

Mail to:

Michael and Lindsay Mazouch

3116 28th St.

Great Bend, KS 67530

(620) 792-6290

Groom \_\_\_\_\_ Age \_\_\_\_ Bride \_\_\_\_\_ Age \_\_\_\_

Mailing Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Email Address \_\_\_\_\_

Religion \_\_\_\_\_ Religion \_\_\_\_\_

Proposed Date of Wedding \_\_\_\_\_

Priest \_\_\_\_\_ Parish \_\_\_\_\_

Has there been a prior marriage for either of you? \_\_\_\_\_

1st Choice of Dates \_\_\_\_\_ 2nd Choice of Dates \_\_\_\_\_

If you have special needs for physical handicap, diet or other, please call Michael and Lindsay Mazouch at (620) 792-6290.

*A Wedding is a Day . . . A Marriage is a Lifetime*