

GOLDEN AND SILVER WEDDING ANNIVERSARY CELEBRATION
Information Collection Form

**THIS FORM SHOULD BE SUBMITTED TO YOUR PARISH SECRETARY NO LATER
THEN OCTOBER 16, 2017. Thank you!**

Personalized commemorative certificates will be presented to each couple. This form should be filled out by the couple and returned to the parish secretary.

TYPE or PRINT.

GOLDEN ANNIVERSARY

(circle one)

SILVER ANNIVERSARY

First Names (Husband) (Wife) Last Name

Street Address _____

City/Town _____ New Jersey _____ (Zip Code)

Email _____ (His) _____ (Hers)

Phone # _____ (His) _____ (Hers)

Date of Marriage _____

Current Parish _____ Parish Town _____

Approximately how many guest will be attending? _____

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I am a lector/reader in my parish and would like to be considered as a possible reader for this Mass. Name _____

We needs special seating arrangements (i.e., wheelchair, disability, etc.). Please give specifics. _____