

GLAD TIDINGS CHURCH
Biographical Wedding Information

CONFIDENTIAL

Today's Date _____

Personal:

Name _____

Home Address _____

City/State/Zip _____ Birth Date _____

Place of Employment _____ Home Telephone _____

Occupation _____ Work Telephone _____

Education:

School Attended	Year Completed	Degree/Diploma
_____	_____	_____
_____	_____	_____
_____	_____	_____

Marital Status:

Check One:

- Single
- Separated
- Divorced
- Widowed

Note Appropriate Dates:

Parents:

Father _____ Age _____

Occupation _____ Church _____

Mother _____ Age _____

Occupation _____ Church _____

Is the present marriage the first for your father? _____ for your mother? _____

Brothers and Sisters:

(Please list in order starting with the oldest and including yourself in the proper order)

Name(s)	Age	Sex	Marital Status	Occupation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Children:

(If you have children, please list them in the same manner as above.)

Name	Age	Sex	Marital Status	Occupation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Military Service:

Are you a member of the armed forces or a veteran? _____ If so, please provide a brief statement of your record of service.

Employment:

What is the longest you have been employed at any job? _____
How long have you been employed at your current job? _____

How many jobs have you held over the past three years? _____

Medical:

Do you have a family doctor? _____

If so, who? _____

When was the last time you consulted with this doctor?

Are you currently taking any medications? _____ If so, please explain briefly.

Have you had any addictions (e.g. drugs, alcohol, tobacco)? _____ If so, please explain briefly.

Have you recovered from these addictions? If so please explain briefly the treatment you received.

Do you currently have any addictions? If so, please explain briefly.

Are you subject to any bothersome habits or nervous disorders that impair you from functioning as you would like to? _____ If so please explain briefly.

Criminal History:

Other than traffic violations, have you ever been in trouble with the law? _____ If so, please explain briefly.

What has been your church affiliation?

Are you a Christian? _____ Regardless of your response to this question, use the remaining space on this sheet to explain your response – including your own definition of what a Christian is, and how you measure up to it at this point in your life.

What would you like to see accomplished as we meet together? What are your expectations of premarital counseling? Make a brief list of the things that come to your mind.

Have you ever sought counsel before? _____ If so, please explain briefly whom you have seen, for what basic reasons, and for how long

Which pastor from Glad Tidings Church would you like to marry you? _____

If not from Glad Tidings, who will perform the ceremony? _____

On what date would you like to be married? (*Availability of the facility is subject to the church calendar.*)

1st choice _____

2nd choice _____

Will you hold your reception at our church?

If not, where? _____

Please describe the details of your reception _____

Thank you for your thoughtful answers! Please be assured that no information on these pages will be shared with anyone without your expressed consent.