

Marriage Preparation Questionnaire

- Date of Marriage: _____ Requested MP Zoom Date: _____

- Groom Information

Name: _____

Email: _____

Telephone number: _____

- Bride Information

Name: _____

Email: _____

Telephone number: _____

- Address where materials can be mailed:

Note: If you are not going to be at the same location as your fiancé/e on the day of the Zoom Session please give us a second address where we can send the Workbook.

Second Address:

- Church where wedding will take place:

- Presiding Priest / Deacon:

- Name of Church that is preparing you for marriage:

Note: Payment is due before attending session.

*The registration fee for the Marriage Preparation Zoom Session is \$100.00 per couple.

Payment options:

Online: <http://archla.org/marriagepreparation>

Check, mailed to:

Office of Family Life

3424 Wilshire Blvd., Los Angeles, CA 90010 Attn.: Annette Vichot

Thank you

Candy Metoyer cmetoyer@la-archdiocese.org