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ST KEVORK ARMENIAN APOSTOLIC CHURCH OF OREGON

9215 SE Church St., Clackamas OR 97015 Tel: 503 656-9144

APPLICATION FOR HOLY MATRIMONY

(Please type or print. Return completed application to the St. Kevoork Church office)

For Office Use only:
License # _____
Certificate # _____

Wedding Date _____ / _____ / _____
Time _____

1. Groom's Name _____ DOB _____ / _____ / _____

2. Address _____ Zip _____

3. Phone # (H) _____ (W) _____ (Cell) _____

4. What denomination was the Groom Baptized? _____

5. If not baptized or confirmed, the following date is suggested for baptism and/or confirmation in the Armenian Church. Date _____ / _____ / _____ Time _____

6. Marital status of Groom Never Married; Widower; Divorced

7. Groom's Father name _____ Mother's maiden name _____

8. Bride's Name _____ DOB _____ / _____ / _____

9. Address _____ Zip _____

10. Phone # (H) _____ (W) _____ (Cell) _____

11. What denomination was the Bride Baptized? _____

12. If not baptized or confirmed, the following date is suggested for baptism and/or confirmation in the Armenian Church. Date _____ / _____ / _____ Time _____

13. Marital status of Bride (circle one) Never Married; Widow; Divorced

14. Bride's Father name _____ Mother's maiden name _____

15. Best Man _____

(The best man must be a Christian)

16. Address _____ Zip _____

17. Maid of Honor _____

18. Address _____ Zip _____

19. Consultation with the Parish Priest Date ___/___/___ Time _____

20. Place of Wedding St. Kevork Armenian Church; _____

(Other location, only with priest's approval)

Address _____

21. Wedding Rehearsal Date ___/___/___ Time _____

22. Officiating Clergy: Rev. Father Yeremia; _____

(Other clergy only with parish priest's approval)

23. Language of service: Armenian; Russian; English

24. Place of reception: _____

25. Number of guests: _____

26. Address of the newlyweds after the wedding _____

DONATIONS FOR HOLY MATRIMONY

(Donations have been suggested and approved by Parish Council 2015)

Members \$400

Non Members \$450

Hall: \$200

Cleaning deposit: \$200

To secure Wedding service date \$200 not refundable deposit is required 30 days prior to service. Balance must be paid before service.

Name _____

Signature: _____