



Christ the Saviour Orthodox Church

5501 Old Locust Lane, Harrisburg, Pennsylvania 17109

Telephone: 717-652-1825 • Web: www.CTSHBG.org

Fr. Stephen Vernak, Pastor • Email: pastor@ctshbg.org

MARRIAGE REQUEST

Requested date of Wedding: _____

Time: _____

A. To be completed by the woman:

[First Name] [Last Name]

Date of Birth: _____ Place of Birth: _____

Current Address: _____
[Number & Street] [City] [State] [Zip Code]

Place of Baptism & Date (+ Denomination if non-Orthodox) – *Please attach copy of baptismal certificate:*

Fathers Full Name: _____

Mother Name + (Maiden Name): _____

Have you ever been married previously? _____.

If **YES**, please state the circumstances on the reverse side or on a separate sheet of paper.

Telephone Number: _____ Email: _____

B. To be completed by the man:

[First Name] [Last Name]

Date of Birth: _____ Place of Birth: _____

Current Address: _____
[Number & Street] [City] [State] [Zip Code]

Place & Date of Baptism (+ Denomination if non-Orthodox) – *Please attach copy of baptismal certificate:*

Fathers Full Name: _____

Mothers Full Name + (Maiden Name): _____

Have you ever been married previously? _____.

If **YES**, please state the circumstances on the reverse side or on a separate sheet of paper.

Telephone Number: _____ Email: _____

(OVER)

C. Name(s) of Witnesses:

[Best Man] [Relationship and Contact Info]

[Maid or Matron of Honor] [Relationship and Contact Info]

Are both witnesses Orthodox or of some other Christian communion?

Best Man [Yes or No] [Denomination, if not Orthodox]

Maid or Matron of Honor [Yes or No] [Denomination, if not Orthodox]

D. Statement of Understanding:

I understand that the Sacrament of Marriage is a special blessing of the Church, and that there are rules governing its proper celebration. I understand that there are certain times, especially, but not limited to, the fasting seasons, when the Church does not perform marriages, and that I cannot consider a date to be firm until I have met with the Priest and been give his guidance and approval in accordance with the accepted norms of the Church and this particular parish.

I also understand and acknowledge that pre-marital counseling is a necessary preparation for the Sacrament of Marriage. During the sessions I will openly explore the spiritual, social, physical, emotional, and moral aspects of what makes Christian Orthodox marriage unique and correct any spiritual or moral impediments which would prevent my participation in the Sacrament.

[Man] [Date]

[Woman] [Date]

*When you have completed this form, please call
Fr. Stephen Vernak at 717-652-1825 to set-up a time to meet.*