

SACRED HEART PARISH
3141 ST. STEPHENS DRIVE
ANDERSON, CA 96007
530-365-8573 (tel) 530-365-9544 (fax)

PRE-NUPTIAL QUESTIONNAIRE - GROOM

Name of Groom: _____
(First Middle Last)

Current Address: _____

City: _____ State: _____ Zip: _____ Phone: _____
home work

Age: _____ Religion: _____ Occupation: _____

Parents: _____ Religion: _____
(Father)

_____ Religion _____
(Mother – Maiden Name)

Parent's Mailing Address: _____ City: _____

State: _____ Zip _____

Please answer the following questions as honestly as possible:

Is this your first marriage: _____ (if not, please give details of previous marriage(s) on the back)

How long have you lived in Sacred Heart Parish? _____

Are you or your parents registered parishioners? _____

Are you currently practicing your faith, attending Mass and receiving the sacraments? _____

If not practicing, or if non-Catholic, please describe your relationship with the church: _____

Why do you want to be married at Sacred Heart Church? _____

How long have you known your fiancée? _____

When did you become engaged? _____

Are you presently living together? _____

Is your fiancée pregnant? _____

Proposed Date of Wedding: _____

Best Man: _____

Wedding Celebrant (Priest or Deacon): _____