



"ST.S. KIRIL & METODIJ" MACEDONIAN ORTHODOX CHURCH
"СВЕТИ КИРИЛ И МЕТОДИЈ" МАКЕДОНСКА ПРАВОСЛАВНА ЦРКВА
 10 S.330.Roud 83 Willowbrook, Illinois 60527 Tel. Fax. (630)654-0016
 Parish Priest Telephone (630) 794-9178



Under Jurisdiction of the
 MOTHER CHURCH and HOLY SYNOD
 Skopje, Macedonia

INFORMATION FOR HOLY MATRIMONY

WE WOULD LIKE TO BE MARRIED IN THE MACEDONIAN
 ORTHODOX CHURCH "ST.S. KIRIL & METODIJ" at _____ (time)
 On (date) _____

please print

***GROOM** (first and last name) _____
 Address _____ Telephone# _____
 Date of Birth _____
 City of Birth _____ State _____ Country _____
 Religion _____ Nationality _____
 Parents first & last names _____

Were you baptized in the Orthodox Church? Yes or No

Is this your first marriage? Yes or No

***BRIDE** (first and last name) _____
 Address _____ Telephone# _____
 Date of Birth _____
 City of Birth _____ State _____ Country _____
 Religion _____ Nationality _____
 Parents first & last names _____

Were you baptized in the Orthodox Church? Yes or No

Is this your first marriage? Yes or No

***GODFATHER** (first and last name) _____
 Address _____ Telephone# _____
 Baptized in Orthodox Church? Yes or No
 Married in Orthodox Church? Yes or No

***BEST MAN**

Baptized in Orthodox Church? Yes or No

Married in Orthodox Church? Yes or No

Signatures of Applicants

Groom _____ Bride _____ Today's date _____