



# WEDDING REQUEST FORM

St. Austin Catholic Parish  
2026 Guadalupe Street  
Austin, Texas 78705

512/477-9471    www.staustin.org

**PLEASE CLEARLY PRINT ALL INFORMATION**

Today's Date \_\_\_\_\_

**BRIDE** \_\_\_\_\_

**GROOM** \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_

E-mail address \_\_\_\_\_

Telephone    HM (\_\_\_\_) \_\_\_\_\_

Telephone    HM (\_\_\_\_) \_\_\_\_\_

WK (\_\_\_\_) \_\_\_\_\_

WK (\_\_\_\_) \_\_\_\_\_

MOB (\_\_\_\_) \_\_\_\_\_

MOB (\_\_\_\_) \_\_\_\_\_

Religion \_\_\_\_\_

Religion \_\_\_\_\_

Current Parish \_\_\_\_\_

Current Parish \_\_\_\_\_

Has either of you been married before? (circle one)    YES    NO

What are your choices of a desired wedding date and time?

Date: (you may list several choices)

Time: (circle one)

1. \_\_\_\_\_

11 a.m.          2 p.m.          7 p.m.

2. \_\_\_\_\_

11 a.m.          2 p.m.          7 p.m.

3. \_\_\_\_\_

11 a.m.          2 p.m.          7 p.m.

Do you anticipate having: A Wedding Mass? \_\_\_\_    A Wedding without a Mass? \_\_\_\_    Uncertain \_\_\_\_

Are you requesting a particular St. Austin's priest or deacon to witness your marriage?    YES    NO

If yes, which one? \_\_\_\_\_

Will you be asking a visiting priest or deacon to witness your marriage?    YES    NO

If yes, who? \_\_\_\_\_

*(If you will be asking a visiting priest or deacon to witness your marriage, the date of your wedding will be confirmed only after he has provided a letter stating that he has agreed to do so.)*

**(continued =>)**

*Please read the following:*

We understand that the date and time of our wedding will be confirmed when a St. Austin's priest (or visiting clergy) has agreed to witness the marriage, and a deposit of \$250.00 has been received.

We understand that, for the purposes of weddings celebrated in St. Austin Catholic Church, a parishioner is defined as a registered, financially supporting member of the parish at the time the wedding request is made, or whose parents are currently registered and contributing members of the parish.

We have been advised not to reserve a reception site, order invitations, etc. until a date and time for the wedding have been confirmed.

We have read and understand the guidelines concerning weddings in St. Austin Catholic Church.

\_\_\_\_\_  
(Please acknowledge by signing here.)

**THE ST. AUSTIN'S STAFF COMPLETES THE FOLLOWING:**

Name of priest/deacon who will witness the marriage \_\_\_\_\_

Date of wedding \_\_\_\_\_ Time \_\_\_\_\_

Date of rehearsal \_\_\_\_\_ Time \_\_\_\_\_

❖ **When you have agreed to the wedding date and time, make a copy of this form (front and back), keep the original and**

▶ **give one copy to the Front Desk Receptionist who will enter the wedding in the Master Calendar.**

**FOR PARISH OFFICE USE ONLY**

Entered on EMS calendar \_\_\_\_\_ and in computer wedding log \_\_\_\_\_  
(date) (date)

Deposit received \_\_\_\_\_ Amount \_\_\_\_\_ Check # \_\_\_\_\_  
(date)

Balance received \_\_\_\_\_ Amount \_\_\_\_\_ Check # \_\_\_\_\_  
(date)

(rev. 08/12)