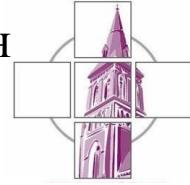


CATHEDRAL OF ST PATRICK & ST JOSEPH WEDDING BOOKING FORM



- Date you wish to hold your wedding: _____
- Exact time your wedding will start: _____
- Do you plan to have a Nuptial Mass _____ Yes _____ No (pse tick)
- **Name of Bride:** _____ **Contact Phone numbers:**
Home: _____
Work: _____
Mobile: _____
Email: _____
Please tick if you are Catholic
- **Name of Groom:** _____ **Contact Phone numbers:**
Home _____
Work: _____
Mobile: _____
Email: _____
Please tick if you are Catholic
- Contact address for mailing of booking confirmation/receipt:

Postcode: _____
- Name and phone number of the priest who will celebrate your wedding:

- Which parish do you belong to?

- **Donation** (to be sent with this form to secure your booking)
Amount \$ _____ **For office:** Receipt no: _____ Date Rec: _____
Payment method: (tick) cheque: _____ cash: _____ direct credit: _____
(If paying by direct credit : supply names & wedding date BNZ 02 0100 0120958 02)

Please sign below to acknowledge you have read and accepted the guidelines outlined in the Cathedral Wedding Booklet, including an assurance that your wedding will commence on time, flowers required for the Cathedral are to be organized through Cathedral Florist and liaison with Director of Music regarding your choice of music.

Email : info@stpatricks.org.nz ~ St Patrick's Cathedral, 43 Wyndham St, Auckland 1010