

Trinity Cathedral  
Information Form  
Holy Union

Holy Union of \_\_\_\_\_

Requested Date \_\_\_\_\_ Assigned Clergy \_\_\_\_\_

Partner #1 Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Age \_\_\_\_\_

Baptized \_\_\_\_\_ Date of Baptism \_\_\_\_\_

Confirmed \_\_\_\_\_ Date of Confirmation \_\_\_\_\_

Communicant \_\_\_\_\_ Denom. \_\_\_\_\_

Parents:

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

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Partner #2 Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Age \_\_\_\_\_

Baptized \_\_\_\_\_ Date of Baptism \_\_\_\_\_

Confirmed \_\_\_\_\_ Date of Confirmation \_\_\_\_\_

Communicant \_\_\_\_\_ Denom. \_\_\_\_\_

Parents:

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

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Witnesses Information

Name \_\_\_\_\_

Name \_\_\_\_\_

Additional Members:

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Office Information

Officiant \_\_\_\_\_

Date of Ceremony \_\_\_\_\_ Time \_\_\_\_\_

Rehearsal Date \_\_\_\_\_ Time \_\_\_\_\_

Eucharist \_\_\_\_\_

Coordinator \_\_\_\_\_ Organist \_\_\_\_\_

Soloist \_\_\_\_\_ Additional Musician \_\_\_\_\_

Member \_\_\_\_\_ Non-Member \_\_\_\_\_

Deposit \_\_\_\_\_ Payment \_\_\_\_\_

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