

**Church of Leamington Priors St Paul, Leamington Spa
Banns of Marriage Form (Revised June 2009)**

Date & Time of Proposed Marriage	Full Names & Surname	Age*	Condition (i.e. Single, widow(er), divorced)	Rank or Profession	Residence at time of Marriage, Tel. No. & email address	Father's Full Names and Surname (If deceased, add "deceased")	Rank or Profession of Father
	(M)						
	(F)						

* If you will be under 18 years of age on the day of the proposed marriage please attach a letter of parental consent.

How long have you lived at the above address?	Nationality	Date of Birth	Have you been baptised?	Are you related to one another?	Have you been previously married? Yes / No	If you have been previously married was the marriage terminated by death, divorce or annulment?	Name of the Parish in which you live (Church & Town / village)	Name of the Church in which you wish to be married?
(M)								
(F)								

Address of new home (if known) : _____

Tel. No: _____

We certify that to the best of our belief the answers to the above questions are correctly given:

Date: _____

Signed (M): _____

Signed (F): _____

