

Pre-Marriage Mentoring Intake Form

His Name: _____

Contact Address: _____

Contact Phone #: _____ Contact Email: _____

His Age: _____ Married before? _____

Children? _____

Her Name: _____

Contact Address: _____

Contact Phone #: _____ Contact Email: _____

Her Age: _____ Married before? _____

Children? _____

Wedding Date: _____

How long have you known each other? _____

Who's officiating the wedding? _____

Church affiliation? _____