

## We want to take part in the Marriage Preparation Course

**November - December 2017**

|   | Man | Woman |
|---|-----|-------|
| First Name  |     |       |
| Surname   |     |       |
| Date of birth                                     |     |       |
| Place of birth                                    |     |       |
| Current address                                   |     |       |
| Postcode  |     |       |
| City  |     |       |
| e-mail  |     |       |
| Telephonenumber                                   |     |       |
| Religion  |     |       |
| Parish to which you belong                        |     |       |
| Name of pastor in charge                          |     |       |
| Baptized?   |     |       |
| Confirmed?  |     |       |
| Date and place of civil wedding                   |     |       |
| Intended Date and place of marriage in the church |     |       |
| Course paid                                       |     |       |
| Any special remarks?                              |     |       |

*Payment in cash or, if you prefer, money transfer to Stichting Onze Lieve Vrouwekerk Keizersgracht 220  
1016 DZ Amsterdam IBAN NL16 INGB 0000 0838 31 ( adding ' Marriage Course' )*