



COUPLE'S INFORMATION

Bride's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

Have you been baptized in any tradition? _____ What tradition? _____

Parish of Baptism: _____ Parish of Confirmation and date: _____

Home Parish: _____

Have you ever been previously ordained or married, including a civil union? _____

**A declaration of a catholic ecclesial court is required for all previous marriages (including civil) in order to schedule a wedding at Seattle U.*

Current Student/Faculty/Staff ID# _____

Alumni - Year of Graduation: _____

Regent/Trustee/Friend of the University

Groom's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

Have you been baptized in any tradition? _____ What tradition? _____

Parish of Baptism: _____ Parish of Confirmation and date: _____

Home Parish: _____

Have you ever been previously ordained or married, including a civil union? _____

**A declaration of a catholic ecclesial court is required for all previous marriages (including civil) in order to schedule a wedding at Seattle U.*

Current Student/Faculty/Staff ID# _____

Alumni: Graduation Year _____

Regent/Trustee/Friend of the University

CEREMONY DETAILS

Requested date of Wedding: _____ Requested time: _____

Requested date of Rehearsal (typically the day before): _____ Requested time: _____

Type of Ceremony: Liturgy of the Word Mass (with communion)

Number of guests expected: _____ Number of guests for communion (if Mass): _____

Presider: _____ Phone: _____

PRIEST DEACON

Email: _____

Presider must be selected at least 3 months before your wedding. University Ministry staff can help you connect with a Jesuit on campus as needed.

PLEASE COMPLETE IF THE PRESIDERS IS NOT FROM SEATTLE UNIVERSITY:

Church: _____

Address: _____

City: _____ State: _____ Zip: _____

Diocese or Province: _____ Superior or Bishop: _____

CERTIFICATE OF COMPLETION OF MARRIAGE PREPARATION IS DUE 4 MONTHS PRIOR TO THE WEDDING
The Program Manager for Liturgy can provide more information about marriage preparation options.

Marriage Preparation Program Chosen: _____

LIABILITY INSURANCE IS REQUIRED FOR ALL WEDDINGS IN ACCORDANCE WITH THE POLICIES OF SEATTLE UNIVERSITY. INITIALS REQUIRED.

We agree to obtain liability insurance in excess of \$1,000,000 and to provide certified proof of insurance no later than 5 months prior to the wedding as prescribed in the wedding guidelines.

INITIAL

INITIAL

We agree that all music and musicians will be approved by the PM for Liturgy by:

30 DAYS BEFORE WEDDING

INITIALS REQUIRED

We have read the policies and guidelines for weddings at Seattle University and we agree to follow all of the policies and procedures.

INITIAL

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We understand that a minimum non-refundable deposit of \$250 must accompany this financial agreement as a deposit.

INITIAL

INITIAL

Please insert a recent photo of the bride and groom.

COST OF WEDDING/FINANCIAL AGREEMENT:

- Standard Fee: \$2,000
- Regents/Trustees and their Families: \$1,500 (25% off)
- Alumni: \$1,000 (50% off)
- Current Students, Faculty, and Staff: \$500 (75% off)

We will pay \$100 for parking for our guests: _____
REQUIRED FOR GROUPS OVER 30

My full fee (payable to Seattle University) will be: _____

We agree to complete all wedding fee payments by: _____
30 DAYS BEFORE WEDDING

We agree to pay the wedding fee by Credit Card (Visa or MC) or Check in the following manner:

- Full fee is attached with this agreement.
- Fee (minus deposit) to be paid in a single payment by: _____
30 DAYS BEFORE WEDDING
- Other. Please propose your own terms on a separate sheet of paper and attach to this form.

BRIDE SIGNATURE: _____ DATE: _____

GROOM SIGNATURE: _____ DATE: _____

SIGNATURES AND DATES REQUIRED



_____/_____/_____

I authorize Seattle University University Ministry to charge my card for \$_____ as deposit payment for the _____ wedding on _____.
(COUPLE'S LAST NAMES) (WEDDING DATE)

I authorize Seattle University to charge my outstanding balance for this wedding and associated costs (Parking) at 30 days before my ceremony date unless I make the payment in a different format.

Card number: _____ Exp. Date: ____/_____
(VISA OR MASTERCARD ONLY)

Name on card: _____ Security Code: _____

Signature

Printed Name