



Holy Trinity Catholic Church

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Mentor couple feedback form

Mentor couple: _____

Engaged couple: _____

Wedding date (if set tentatively): _____

Wedding's Church celebration: _____

First's date session: _____ **Last's date session:** _____

How many session do you had?: _____

Date when this form was completed: _____

Comments on engaged couple's participation and expression: _____

Comments on engaged couple's maturity: _____

Other comments: _____

Recommendations _____
