

REQUEST for DELEGATION to WITNESS MARRIAGE VOWS
ST. CHARLES BORROMEO CATHOLIC CHURCH
Grand Coteau, Louisiana 70541
337-662-5279

Date: _____

Name of priest/deacon requesting delegation: _____

Church address: _____

Phone: _____ Email: _____

I request delegation to witness the vows of:

Bride: _____ Groom: _____

Wedding date and time: _____

Wedding will be held at _____ St. Charles Church or _____ Academy of the Sacred Heart

This will be a _____ wedding Mass or _____ wedding ceremony outside of Mass

Weddings are held at St. Charles only at the following times:

Fridays at 6:00PM or 6:30PM

Saturdays at 11:00 AM, 1:00PM, 6:00PM or 6:30PM

* Weddings are not held at St. Charles during the season of **Lent**.

Rehearsal date and time: _____

Rehearsals are held at St. Charles only at the following times:

Thursdays at 6:00PM, 6:30PM or **Fridays** at 6:00PM, 6:30PM

I accept that it is my responsibility to deliver the completed paper work of this marriage to the rectory office of St. Charles Borromeo Church. I also will send the fully signed marriage license back to the civil authority.

Signature of priest/deacon requesting delegation:

Delegation granted by: _____ date: _____