



Celebrating and honouring life's precious moments

Katherine Dimou, B.A., W.P.I.C.C.  
 Licensed Marriage Officiant & Wedding Coordinator  
 LifetimeCeremonies@gmail.com  
 905.978.2210  
 www.LifetimeCeremonies.ca

## WEDDING INFORMATION

PARTNER A	PARTNER B
FIRST NAME*:	FIRST NAME*:
LAST NAME*:	LAST NAME*:
Birth date*: <i>(day/month/year)</i>	Birth date*: <i>(day/month/year)</i>
Home address* <i>(include city, province, postal code):</i>	Home address* <i>(include city, province, postal code):</i>
Best tel # to reach you: Email:	Best tel # to reach you: Email:
Name of parent*:	Name of parent*:
Name of parent*:	Name of parent*:

## WEDDING DATE / TIME / LOCATION

<b>WEDDING DATE</b> <i>(day/month/year)</i>	<b>WEDDING TIME</b> <i>If unsure about the time, please write TBD in the box</i>	Will your wedding take place during a statutory holiday or long weekend?	No Yes <i>(additional \$100 applies)</i>
---	--	--	---

## WEDDING VENUE INFORMATION

Name or location of wedding venue:	
Street address <i>(include city, province, postal code):</i>	
Email:	Website:

## WEDDING SERVICES REQUIRED

MARRIAGE OFFICIANT	PHOTOGRAPHER	WEDDING DAY COORDINATOR
<i>Service agreement is a separate document signed at the time of booking. Please note that a retainer is due upon booking.</i>		

## WITNESSES FOR COUPLE *(two people over 18 years old)*

Name of witness*:	Name of witness*:
Relationship to partner A:	Relationship to partner B:
City & prov/state*:	City & prov/state*:
Tel:	Tel:

Consultation meeting requested for week of:	2019	Day	Evening	Weekend	
How did you learn about Lifetime Ceremonies?	LC Website	Google	Friend	Event	Other
Name of person who referred you, or event where you learned of Lifetime Ceremonies:					

*NOTE: Information marked with an \* is required by the Marriage Office of the Registrar General*